

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 381617

Entity Name: CODE, INC.

FILED
Mar 14, 2005
Secretary of State

Current Principal Place of Business:

6758 N. MILITARY TRAIL
SUITE 301
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

Current Mailing Address:

6758 N. MILITARY TRAIL
SUITE 301
WEST PALM BEACH, FL 33407 US

New Mailing Address:

FEI Number: 59-1373879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTSON, DOUGLAS K
8276 QUAIL MEADOW WAY
WEST PALM BEACH, FL 33412 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MATTSON, DOUGLAS K,
Address: 8276 QUAIL MEADOW WAY
City-St-Zip: WEST PALM BEACH, FL 33412

Title: VPD () Delete
Name: MATTSON, DOUGLAS K. J
Address: 3578 LAKEVIEW DR
City-St-Zip: DELRAY BEACH, FL 33445

Title: VPD () Delete
Name: MATTSON, ERIC J
Address: 6301 NW 34TH AVE
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: STD () Delete
Name: MATTSON, MARK E
Address: 3507 VINNING CT
City-St-Zip: KISSIMMEE, FL 33471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS K. MATTSON

PRES

03/14/2005

Electronic Signature of Signing Officer or Director

Date