## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 450721**

Address:

City-St-Zip:

Entity Name: SIMPLIFIED CONCEPTS, INC.

FILED Jul 18, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8401-36 AVE NO SAINT PETERSBURG, FL 33710 **Current Mailing Address: New Mailing Address:** 8401-36 AVE NO SAINT PETERSBURG, FL 33710 FEI Number: 59-1533628 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BELANGER, LW 8401 - 36TH AVE NO. ST PETERSBURG, FL 33710 US 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BELANGER, LARRY Name: Name: 8401-36 AVE NO Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33710 City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: BELANGER, MICHAEL Name: 8401 36TH AVE NO Address: Address: SAINT PETERSBURG, FL 33710 City-St-Zip: City-St-Zip: Title: ( ) Change (X) Addition Title: () Delete VΡ BELANGER, MARK L Name: Name: 8401-36TH AVE.NO Address Address: City-St-Zip: City-St-Zip: ST. PETERSBURG, FL 33710 Title: () Delete Title: VΡ ( ) Change (X) Addition ROONEY, KENNETH Name: Name:

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.

Address:

City-St-Zip:

8401-36TH AVE.NO

ST. PETERSBURG, FL 33710

SIGNATURE: L.W.BELANGER P 07/18/2005