

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 479577

FILED  
Mar 04, 2005  
Secretary of State

Entity Name: INGE WILLIS ENTERPRISES, INC.

## Current Principal Place of Business:

25720 W NEWBERRY RD  
NEWBERRY, FL 32669 US

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 533  
NEWBERRY, FL 326697533 US

## New Mailing Address:

FEI Number: 59-1606165

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIS, MICHAEL I  
25720 W. NEWBERRY RD.  
NEWBERRY, FL 32669 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: P ( ) Delete  
Name: WILLIS, MICHAEL I P  
Address: P.O. BOX 533 NA  
City-St-Zip: NEWBERRY, FL

Title: VP ( ) Delete  
Name: WILLIS, CHAD VP  
Address: P.O. BOX 533 NA  
City-St-Zip: NEWBERRY, FL

Title: S ( ) Delete  
Name: WILLIS, MARGUERITE S  
Address: P.O. BOX 533 NA  
City-St-Zip: NEWBERRY, FL 32669

Title: T ( ) Delete  
Name: WILLIS, MARGUERITE T  
Address: P.O. BOX 533 NA  
City-St-Zip: NEWBERRY, FL

Title: AT ( ) Delete  
Name: MIKE, WILLIS AT  
Address: P.O. BOX 533 NA  
City-St-Zip: NEWBERRY, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: WILLIS, MICHAEL I D  
Address: P.O. BOX 533 NA  
City-St-Zip: NEWBERRY, FL

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

Title: PSD (X) Change ( ) Addition  
Name: WILLIS, MARGUERITE PSD  
Address: P.O. BOX 533 NA  
City-St-Zip: NEWBERRY, FL 32669

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: MICHAEL I. WILLIS

D

03/04/2005

Electronic Signature of Signing Officer or Director

Date