


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90561 013 ***150.00

DOCUMENT # 531687	
1. Entity Name MEDLEY RESOURCES, INC.	

Principal Place of Business 9401 NW 106TH ST STE 101 MEDLEY, FL 33178 US	Mailing Address 9401 NW 106TH ST STE 101 MEDLEY, FL 33178 US
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DO NOT WRITE IN THIS SPACE



01192005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1740035	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ROBINSON, BARNETT ESQ 120 W PALMETTO PARK RD STE 260 BOCA RATON, FL 33432

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LARGAY, CHARLES E. 9401 NW 106TH ST, STE 101 MEDLEY, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST LARGAY, CHARLES E JR 9401 NW 106TH ST, STE 101 MEDLEY, FL 33178
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS KNOWLES, JANET 9401 NW 106TH ST, STE 101 MEDLEY, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>Janet Knowles, Assistant Secy</i> JANET KNOWLES, ASSISTANT SECY.	04/15/05 Date	305-885-2458 Daytime Phone #
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