2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # 562593			Secretary of State
1260 CENTE	e of Business RAL FLORIDA PARKWAY L 32837-9259	Mailing Address 1260 CENTRAL FLORIDA PAR ORLANDO, FL 32837-9259	KWAY	
<u> </u>	Total Control		, 	
DO NOT WRITE IN THIS SPACE			CE	01202005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For NOT APPLICABLE Not Applicable 5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				
DENNIS P DARMOC 1260 CENTRAL FLORIDA PARKWAY ORLANDO, FL 32837			DO NOT WRITE IN THIS SPACE	
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 Signature, typed of printed name of registered agent and filtre if applicable. (NOTE: Registered Agent signature required when refusating) I DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
10,	OFFICERS AND D	RECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD WOODSBY, RONALD E 1445 OAKLAWN PL LAKELAND, FL 33803			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD WOODSBY, CHARLES E 8959 BAY COVE COURT ORLANDO, FL 0, 32819			1100uuu331360 04/26/05-80014-010 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DARMOC, DENNIS P. 1950 LEGION DR WINTER PARK, FL 32789			DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-			
12. I hereby of indicated of the corchanged	certify that the information supplied with the on this report or supplemental report is treporation or the receiver or trustee empower or on an attachment with an address, with	is filing does not qualify for the exe ue and accurate and that my signa ered to execute this report as requi h all other like empowered.	mption stated in Se ture shall have the t red by Chapter 607	ection 119.07(3)(i), Florida Statutes, I further certify that the information same legal effect as if made under oath, that I am an officer or director 7, Florida Statutes, and that my name appears in Block 10 or Block 11 if