

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 607627

FILED
Apr 21, 2005
Secretary of State

Entity Name: POLYCONTEC, INC.

Current Principal Place of Business:

12474 NW HWY 19
CHIEFLAND, FL 32626 US

New Principal Place of Business:

Current Mailing Address:

12474 NW HWY 19
CHIEFLAND, FL 32626 US

New Mailing Address:

FEI Number: 59-3009443 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVANS, CALIE MARIE
22806 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: PSD () Delete
Name: EVANS, CARLIE MARIE,
Address: 22806 W. NEWBERRY RD
City-St-Zip: NEWBERRY, FL

Title: VP () Delete
Name: EVANS, ALAN
Address: 22806 W. NEWBERRY RD
City-St-Zip: NEWBERRY, FL 32669

Title: ST () Delete
Name: ROBSON, LESLEY A
Address: 1108 NE 5TH ST.
City-St-Zip: GAINESVILLE, FL 32601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: EVANS, CARLIE M
Address: 22806 W. NEWBERRY RD
City-St-Zip: NEWBERRY, FL

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: CARLIE MARIE EVANS

PSD

04/21/2005

Electronic Signature of Signing Officer or Director

_____ Date