2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 654127

Name:

Address:

City-St-Zip:

DAVIS, CHRISTOPHER

150 FORTENBERRY ROAD

MERRITT ISLAND, FL 32952

Entity Name: BREVARD ACCOUNTING GROUP C.P.A.'S P.A.

FILED Jan 04, 2005 Secretary of State

Entity Name: BREVARD ACCOUNTING GROOF, C.F.A. 3, F.A.						
Current Principal Place of Business:				New Principal Place of Business:		
150 FORTENBERRY RD VILLA "A" MERRITT ISLAND, FL 32952				150 FORTENBERRY RD VILLA MERRITT ISLAND, FL 32952		
Current Mailing Address:				New Mailing Address:		
150 FORTENBERRY RD VILLA "A" MERRITT ISLAND, FL 32952				150 FORTENBERRY RD VILLA MERRITT ISLAND, FL 32952		
FEI Number:	59-1968410	FEI Number Applied For	r() FEI Nui	mber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
CANADA, MARVIN EUGENE, JR. 539 HIDDEN HOLLOW DRIVE MERRITT ISLAND, FL 32952 US				CANADA, MARVIN E 539 HIDDEN HOLLOW DRIVE MERRITT ISLAND, FL 32952 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: GENE CANADA				01/04/2005		
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PTD () I CANADA, JR, MA 539 HIDDEN HO MERRITT ISLAN	LLOW DRIVE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () I CANADA, TRACE 539 HIDDEN HO MERRITT ISLAN	LLOW DRIVE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	s ()	Delete		Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: GENE CANADA P 01/04/2005