

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 673588

FILED
Mar 11, 2005
Secretary of State

Entity Name: HALKEY-ROBERTS CORPORATION

Current Principal Place of Business:

11600 DR M L KING JR ST NORTH
ST. PETERBSURG, FL 337162397 US

New Principal Place of Business:

Current Mailing Address:

11600 DR M L KING JR ST NORTH
ST. PETERBSURG, FL 337162397 US

New Mailing Address:

FEI Number: 59-2013247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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: V () Delete
Name: LECCEARDONE, LEWIS
Address: 11600 DR M L KING JR ST NORTH
City-St-Zip: ST PETERSBURG, FL

Title: V () Delete
Name: STRICKLAND, JEFFERY
Address: 1 ALLENTOWN PARKWAY
City-St-Zip: ALLEN, TX 750024211

Title: C () Delete
Name: BATTAT, EMILE
Address: 1 ALLENTOWN PARKWAY
City-St-Zip: ALLEN, TX 750024211

Title: V () Delete
Name: LUCIUS, JOHN
Address: 11600 DR M L KING JR ST NORTH
City-St-Zip: ST PETERSBURG, FL

Title: V () Delete
Name: BOWLING, JAMES
Address: 11600 DR M L KING JR ST NORTH
City-St-Zip: ST PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LEWIS LECCEARDONE

V

03/11/2005

Electronic Signature of Signing Officer or Director

Date