

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90079 042 ***150.00

DOCUMENT # 844880
 1. Entity Name
PELICAN WIRE CO., INC.



Principal Place of Business: **6266 TAYLOR ROAD NAPLES FL 34109-1896 US**
 Mailing Address: **6266 TAYLOR ROAD NAPLES FL 34109-1896 US**

JUU1043J



1st MOORE CR2E034 (10/04)

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country Zip Country

4. FEI Number **36-2912867**
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
BILL, LARRY G
~~6266 TAYLOR ROAD~~
~~NAPLES FL 34109~~
3650 Shaw Blvd
Naples FL
34117

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 *Theresa A. Bill* DATE **2.11.05**
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State.

9. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BILL, LARRY G <i>3650 Shaw Blvd.</i> 6266 TAYLOR ROAD NAPLES FL <i>Naples FL 34117</i>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BILL, THERESA A <i>3650 Shaw Blvd</i> 6266 TAYLOR ROAD NAPLES FL <i>Naples FL 34117</i>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BILL, THEODORE <i>3650 Shaw Blvd</i> 6266 TAYLOR ROAD NAPLES FL <i>Naples FL 34117</i>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Theresa A. Bill* DATE **2.11.05** ²³⁹ 325-0108
Signature and typed or printed name of signing officer or director Date Daytime Phone #

ATTACHMENT

50018457
#844880

FEBRUARY 11, 2005

SIRS: ENCLOSED PLEASE FIND YOUR 2005 PROFIT CORPORATION ANNUAL REPORT.

ALL ADDRESSES HAVE CHANGED:

PLEASE CHANGE YOUR RECORDS.

NEW ADDRESS

**PELICAN WIRE CO., INC.
3650 SHAW BLVD.
NAPLES, FL 34117**

ALSO PLEASE CHANGE ADDRESS OF DIRECTORS TO THE ABOVE ADDRESS.

THANK YOU

**THERESA BILL
PELICAN WIRE CO., INC.**