2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2005
Secretary of State

DOCUMENT# F00000002411

Entity Name: GENESIS CONSULTING, INC.

Current Principal Place of Business:

3069 STONE STREET
PORT CHARLOTTE, FL 33981

New Principal Place of Business:

3260 SOUTH SHORE DR.
63A
PUNTA GORDA, FL 33955

Current Mailing Address:

3069 STONE STREET
PORT CHARLOTTE, FL 33981

New Mailing Address:

3260 SOUTH SHORE DR.
63A
PUNTA GORDA, FL 33955

FEI Number: 58-2420394 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEMMONS, RICHARD L
3077 STONE ST
PORT CHARLOTTE, FL 33981 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: PS ( ) Delete
Name: MCLEOD, KAY M
Address: 3069 STONE STREET
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: V ( ) Delete
Name: MCLEOD, WILLIAM A
Address: 3069 STONE STREET
City-St-Zip: PORT CHARLOTTE, FL 33981

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: MCLEOD, KAY M
Address: 3260 SOUTH SHORE DR. # 63A
City-St-Zip: PUNTA GORDA, FL 33955

Title: V (X) Change ( ) Addition
Name: MCLEOD, WILLIAM A
Address: 3260 SOUTH SHORE DR. #63A
City-St-Zip: PUNTA GORDA, FL 33955

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: WILLIAM A. MCLEOD V 01/20/2005
Electronic Signature of Signing Officer or Director Date