


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2005 08:00 AM
Secretary of State

| | |
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| DOCUMENT # F01000000137 1. Entity Name PRIDE MOBILITY PRODUCTS CORPORATION |  |
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| Principal Place of Business 1103 N. 22ND ST. TAMPA, FL 33605 | Mailing Address 182 SUSQUEHANNA AVE. EXETER, PA 18643 |
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DO NOT WRITE IN THIS SPACE



04262005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 23-2443538 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

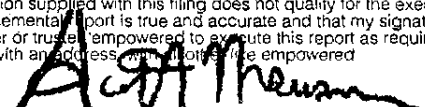
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|---|---|--|
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | C MEUSER, SCOTT 21 PIONEER AVE DALLAS, PA |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V MEUSER, DAN 542 LAKE ROAD EAST BEAR CREEK, PA |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V KRETCHIK, THOMAS RR1 BOX 93 WYOMING, PA |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V MEUSER, STANLEY 116 OSPREY POINT ROAD OSPREY, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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IN THIS SPACE**

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05/03/05-80147-006 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 807, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, which is not so empowered.

SIGNATURE:  4/26/05 (570) 655-5574
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #