2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# F01000001042

Entity Name: SPECPRO, INC.

Current Principal Place of Business:

800 CORDOVA STREET, SUITE 200
ANCHORAGE, AK 99501

New Principal Place of Business:

Current Mailing Address:

4815 BRADFORD DR., SUITE 201
HUNTSVILLE, AL 35805

New Mailing Address:

FEI Number: 92-0156956 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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: PTD ( ) Delete
Name: TOLTON, STEPHEN
Address: 800 CORDOVA STREET, SUITE 200
City-St-Zip: ANCHORAGE, AK 99501

Title: SD ( ) Delete
Name: FERGUSON, APRIL
Address: 800 CORDOVA STREET, SUITE 200
City-St-Zip: ANCHORAGE, AK 99501

Title: D ( ) Delete
Name: LARSON, DOROTHY
Address: 800 CORDOVA STREET, SUITE 200
City-St-Zip: ANCHORAGE, AK 99501

Title: D ( ) Delete
Name: ROBERTS, FREEMAN
Address: 800 CORDOVA STREET, SUITE 200
City-St-Zip: ANCHORAGE, AK 99501

Title: D ( ) Delete
Name: CARTER, MICHAEL
Address: 800 CORDOVA STREET, SUITE 200
City-St-Zip: ANCHORAGE, AK 99501

Title: D ( ) Delete
Name: PAZ LA DE, ARMANDO
Address: 8815 DYER STE 360
City-St-Zip: EL PASO, TX 79904

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:

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: PAM METCALF MGR 04/27/2005

Electronic Signature of Signing Officer or Director — Date