

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000823

FILED
Jan 10, 2005
Secretary of State

Entity Name: GULDMANN, INC.

Current Principal Place of Business:

5505 JOHNS ROAD STE 700
TAMPA, FL 33634 US

New Principal Place of Business:

Current Mailing Address:

5505 JOHNS ROAD STE 700
TAMPA, FL 33634 US

New Mailing Address:

FEI Number: 58-2360050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOCH, STEPHEN A
500 E. KENNEDY BLVD.
SUITE 100
TAMPA, FL 33602 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: PCD () Delete
Name: BUSSE JENSEN, ANDERS D
Address: 5505 JOHNS ROAD, STE 700
City-St-Zip: TAMPA, FL 33634 US

Title: SD () Delete
Name: HORTEN, MICHAEL R
Address: 3479 PACEFERRY CIRCLE
City-St-Zip: SMYRNA, GA 30324 US

Title: SD () Delete
Name: KOCH, STEPHEN A
Address: 500 E. KENNEDY BLVD. STE. 100
City-St-Zip: TAMPA, FL 33602 US

Title: SD () Delete
Name: MATHIESEN, BJORN
Address: GRAHAM BELLS VEG 21-23A
City-St-Zip: DK 8500 ARHUS N, DK 8500 DK

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:

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: ANDERS D. BUSSE JENSEN

PCD

01/10/2005

Electronic Signature of Signing Officer or Director

Date