2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2005 08:00 AM Secretary of State 04192005 No Chg-P CR2E034 (10/03) Applied Far 4. FEI Number **NOT APPLICABLE** Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

Entity Name	-			
EITHOFFER	EQUIPME!	NT COMPANY,	, INC.	
		•	•	

6. Name and Address of Current Registered Agent

DOCUMENT # F02000002396

PANY, INC.

Principal Place of Business

9022 WIGGINS ROAD GIBSONTON, FL 33534 ___ Mailing Address

C/O B.G. STEPHENSON, LTD. 4157 CHAIN BRIDGE ROAD FAIRFAX, VA 22030

DO NOT WRITE IN THIS SPACE

PENSON, ALBERT C 2810 REMINGTON GREEN CIRCLE TALLAHASSEE, FL_32308			DO NOT WRITE IN THIS SPACE			
8. The above the obligat	named entity submits this statement for the prions of registered agent.	urpose of changing its registered office of	r registered agent, or bot	h, In the State of Florida I am familiar with, and accept		
SIGNATURE Signature, typoid or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when refristating) DATE						
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRECT	TORS	The same of the same of the same of			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD REITHOFFER, RICHARD 9022 WIGGINS ROAD GIBSONTON, FL 33534	The state of the s	The form was the same of the s	U00000335936		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD REITHOFFER, P E III 9022 WIGGINS ROAD GIBSONTON, FL 33534	- With the training of the tra		04/27/05-80147-004 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD REITHOFFER, BETTE 154 MONTEREY WAY ROYAL PALM BEACH, FL 33411		DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN T	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filling 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: Richard H. Reithoffel President, Richard H. Reithoffer, 4/19/05 813-611-2233