


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 11, 2005 8:00 am
Secretary of State

05-09-2005 90284 029 ****50.00
07-11-2005 90197 011 ***150.00

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| DOCUMENT # F04000000598 1. Entity Name 20022 INC. |  |
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| Principal Place of Business 2001 9TH AVENUE, SUITE #106 VERO BEACH, FL 32960 | Mailing Address 2001 9TH AVENUE, SUITE #106 VERO BEACH, FL 32960 |
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DO NOT WRITE IN THIS SPACE



06142005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 20-0435941 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent WILLIS, BILL P 2001 9TH AVENUE, SUITE #106 VERO BEACH, FL 32960 |
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| | | |
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| FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P WILLIS, BILL P 2001 9TH AVENUE, SUITE #106 VERO BEACH, FL 32960 |
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12. I hereby certify that the information supplied with this filing 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: B.P. Willis 5 July 05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #