## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000003554

Entity Name: STUNFENCE, INC.

214 S TAYLOR

OAK PARK, IL 60302

Address: City-St-Zip: FILED Apr 19, 2005 Secretary of State

Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:			
	TH OAK PARK K, IL 60301	AVENUE, SUITE 200	SUITE 200	137 NORTH OAK PARK AVENUE SUITE 200 OAK PARK, IL 60301			
Current N	lailing Addres	s:	New Mail	New Mailing Address:			
137 NORTH OAK PARK AVENUE, SUITE 200 OAK PARK, IL 60301			SUITE 200	137 NORTH OAK PARK AVENUE SUITE 200 OAK PARK, IL 60301			
FEI Number	: 36-4308050	FEI Number Applied For ( )	FEI Number Not App	olicable ( ) Certi	ficate of Status Desire	:d ( )	
Name and	d Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
KEY LARC	VERSEAS HIG GO, FL 33037 e named entity:	HWAY C-102 US submits this statement for the p	ourpose of changing	its registered office o	or registered agent,	or both,	
	e of Florida.						
SIGNATUI		ic Signature of Registered Ag	 ent		 Date		
Election Car		g Trust Fund Contribution ( ).	5110		Date		
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	PC ( ) GILMOUR, ROI 1506 CLINTON RIVER FORES	PLACE	Title: Name: Address: City-St-Zip:	()Chang	ge ( ) Addition		
Title: Name: Address: City-St-Zip:	SC () GILMOUR, KAT 1506 CLINTON RIVER FORES	PLACE	Title: Name: Address: City-St-Zip:	()Chang	ge ( ) Addition		
Title: Name:	V () GILMOUR, AND	Delete	Title: Name:	( ) Chang	ge ( ) Addition		

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.

Address:

City-St-Zip:

SIGNATURE: ANDREW GILMOUR V 04/19/2005