

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004249

FILED
Apr 18, 2005
Secretary of State

Entity Name: CASCADE CONSERVATION PRODUCTS, INC.

Current Principal Place of Business:

694 ATLANTIS ROAD, #5
MELBOURNE, FL 32904

New Principal Place of Business:

694 ATLANTIS ROAD
#5
MELBOURNE, FL 32904

Current Mailing Address:

160 PELICAN DRIVE N.E.
PALM BAY, FL 32907

New Mailing Address:

694 ATLANTIS ROAD
#5
MELBOURNE, FL 32904

FEI Number: 91-1611218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARROW, JOHN A
694 ATLANTIS ROAD, #5
MELBOURNE, FL 32904 US

Name and Address of New Registered Agent:

SHARROW, JOHN A
694 ATLANTIS ROAD
#5
MELBOURNE, FL 32904 US

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: JOHN A. SHARROW

04/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: SHARROW, FRANCES P
Address: 160 PELICAN DRIVE N.E.
City-St-Zip: PALM BAY, FL 32907

Title: VPS () Delete
Name: SHARROW, JOHN A
Address: 160 PELICAN DRIVE N.E.
City-St-Zip: PALM BAY, FL 32907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPR (X) Change () Addition
Name: SHARROW, FRANCES P
Address: 160 PELICAN DRIVE N.E.
City-St-Zip: PALM BAY, FL 32907

Title: PT (X) Change () Addition
Name: SHARROW, JOHN A
Address: 160 PELICAN DRIVE N.E.
City-St-Zip: PALM BAY, FL 32907

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: JOHN A. SHARROW

PT

04/18/2005

Electronic Signature of Signing Officer or Director

Date