

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004355

FILED
Jan 05, 2006
Secretary of State

Entity Name: DAVID H. POLLOCK CONSULTANTS, INC.

Current Principal Place of Business:

99 KINDERKAMACK ROAD, SUITE 301
WESTWOOD, NJ 07675

New Principal Place of Business:

Current Mailing Address:

99 KINDERKAMACK ROAD, SUITE 301
WESTWOOD, NJ 07675

New Mailing Address:

FEI Number: 22-3187622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEWARD, JAMES L
12201 RESEARCH PARKWAY
ORLANDO, FL 32826 US

Name and Address of New Registered Agent:

SEWARD, JAMES L
12201 RESEARCH PARKWAY
SUITE 200
ORLANDO, FL 32826 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: JAMES L. SEWARD

01/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSC () Delete
Name: POLLOCK, DAVID H
Address: 99 KINDERKAMACK ROAD, SUITE 301
City-St-Zip: WESTWOOD, NJ 07675

Title: D () Delete
Name: POLLOCK, JONATHAN D
Address: 99 KINDERKAMACK ROAD, SUITE 301
City-St-Zip: WESTWOOD, NJ 07675

Title: D () Delete
Name: POLLOCK, JAMES
Address: 99 KINDERKAMACK ROAD, SUITE 301
City-St-Zip: WESTWOOD, NJ 07675

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DAVID H. POLLOCK

PSC

01/05/2006

Electronic Signature of Signing Officer or Director

Date