

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000006422

Entity Name: ST. PAUL NAVIGATION, INC.

FILED  
Jun 30, 2005  
Secretary of State

## Current Principal Place of Business:

1725 BUCHANAN ST  
PANAMA CITY, FL 32409

## New Principal Place of Business:

## Current Mailing Address:

1725 BUCHANAN ST  
PANAMA CITY, FL 32409

## New Mailing Address:

P O BOX 459  
PANAMA CITY, FL 32402

FEI Number: 41-1372865

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SUMPTON, STEWART F  
1725 BUCHANAN ST  
PANAMA CITY, FL 32409 US

## Name and Address of New Registered Agent:

HAWKINS, CHARLES E  
5322 SOULE DR  
PANAMA CITY, FL 32404 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: CHARLES E HAWKINS

06/30/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: SUMPTON, STEWART F  
Address: 1725 BUCHANAN ST  
City-St-Zip: PANAMA CITY, FL 32409

Title: CFOS (X) Delete  
Name: SUMPTON, STEWART F  
Address: 1725 BUCHANAN ST  
City-St-Zip: PANAMA CITY, FL 32409

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HAWKINS, CHARLES E  
Address: P O BOX 459  
City-St-Zip: PANAMA CITY, FL 32402

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 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: CHARLES E HAWKINS

P

06/30/2005

Electronic Signature of Signing Officer or Director

Date