2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000263

Entity Name: THE INDUSTRIAL FUMIGANT CO.

FILED Apr 21, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
19745 W 15 OLATHE, K						
Current Mailing Address:			New Mailir	New Mailing Address:		
P.O. BOX 1200 OLATHE, KS 660511200						
FEI Number:	44-0529835	FEI Number Applied For ()	El Number Not Appli	cable () Certifica	ate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
TURNER, GORDON 6018-43RD TER., NORTH ST. PETERSBURG, FL 33709 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:						
	Electroni	c Signature of Registered Agent			Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () I NEWLAND, J. M 29 WHEATLAND OTTAWA, KS 66	DR.	Title: Name: Address: City-St-Zip:	P (X) Change NEWLAND, J. MICHAEL 36 WHEATLAND DR. OTTAWA, KS 66067	() Addition	
Title: Name: Address: City-St-Zip:	V () BLACHLY, ROBE 307 N. OAK PAOLA, KS 660		Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name: Address: City-St-Zip:	ST () I BLAUFUSS, THO 13403 WEST 12 OVERLAND PAR	2ND STREET	Title: Name: Address: City-St-Zip:	ST (X) Change BLAUFUSS, THOMAS M 13403 WEST 122ND STR OVERLAND PARK, KS 6	REET	
Title: Name: Address: City-St-Zip:	D () WILBUR, DONAI 304 TOWER PAOLA, KS 660		Title: Name: Address: City-St-Zip:	()Change	() Addition	
Title: Name: Address: City-St-Zip:	D () I ARNOTE, JIM L 4838 SOMERSE PRAIRIE VILLAG		Title: Name: Address: City-St-Zip:	() Change	()Addition	
Title: Name: Address: City-St-Zip:	D () I SWOYER, GLEN 5418 CAENEN SHAWNEE, KS		Title: Name: Address: City-St-Zip:	() Change	() 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.

SIGNATURE: THOMAS M BLAUFUSS ST 04/21/2005