2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

changed, or on an attachment wit

SIGNATURE:

May 09, 2005 8:00 am Secretary of State DOCUMENT # F97000004321 1. Entity Name 05-09-2005 90291 013 ***158.75 TELANTIS VENTURE PARTNERS V, INC. Principal Place of Business Mailing Address 791 WYE RD. 2180 IMMOKALEE ROAD 50050788 **AKRON OH 44333** SUITE 312 NAPLES FL 34110 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) 4. FEI Number City & State City & State Applied For 65-0761765 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. 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. I'am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THILE CD TITLE ☐ Delete Change ☐ Addition MEYERSON, ROBERT F NAME NAME 791 WYE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **AKRON OH 44333** CITY-ST-ZIP DEVPS **PCEO** TITLE TITLE ☐ Delete Change Change ☐ Addition MEYERSON, ADAM H MEYERSON, ADAM H NAME NAME 791 WYE RD STREET ADDRESS 791 WYE ROAD STREET ADDRESS **AKRON OH 44333** CITY ST-ZIP CITY-ST-ZIP AKRON, OH 44383 TITLE **VSTD** ☐ Delete _ Change Addition MEYERSON, ANDREW S MEYERSON, ANDREW \$ 791 Live RD STREET ADDRESS STREET ADDRESS 791 WYE ROAD CITY-ST-ZIP **AKRON OH 44333** CITY-ST-ZIP AKRON, OH 44333 ΑT Change TITLE ☐ Delete TITLE ☐ Addition CULOTTA, ELINOR M NAME 791 WYE RD. STREET ADDRESS STREET ADDRESS AKRON OH 44333 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition GOREK, KATHY J NAME NAME 791 WYE RD. STREET ADDRESS STREET ADDRESS **AKRON OH 44333** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE D, P, CEO Change Addition WYSS, MICHAEL A. 191 WYE RO NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP AKRON, OH 44333 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if

h all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

RECTOR

FILED