

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000044

FILED
Jan 08, 2006
Secretary of State

Entity Name: TAXOLOG, INC.

Current Principal Place of Business:

10 INDUSTRIAL RD
FAIRFIELD, NJ 07004

New Principal Place of Business:

Current Mailing Address:

C/O HARRISON CPA & CONSULTING P.C.
PO BOX 7125
CAVE CREEK, AZ 85327

New Mailing Address:

FEI Number: 22-3583208 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLTON, ROBERT A
DEPT. OF CHEMISTRY,
FLORIDA STATE UNIVERSITY
TALLAHASSEE, FL 32306 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: METTS, LEWIS L
Address: 10 INDUSTRIAL RD
City-St-Zip: FAIRFIELD, NJ 07004

Title: STD () Delete
Name: HARRISON, RICHARD A
Address: PO BOX 7125
City-St-Zip: CAVE CREEK, AZ 85327

Title: D () Delete
Name: HOLTON, ROBERT A
Address: DEPT. OF CHEMISTRY, FLORIDA STATE UNIVER
City-St-Zip: TALLAHASSEE, FL 32306

Title: D () Delete
Name: HINKLE, CLIFFORD R
Address: P.O. BOX 351
City-St-Zip: TALLAHASSEE, FL 32302

Title: D () Delete
Name: ALLGOOD, J. KELLY
Address: 236 WINGED FOOT CIRCLE
City-St-Zip: JACKSON, MS 39211

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:

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: RICHARD A. HARRISON

SEC.

01/08/2006

Electronic Signature of Signing Officer or Director

_____ Date