## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F99000001973

Entity Name: ENGLE MARTIN & ASSOCIATES, INC.

FILED Mar 30, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	ST ATLANTIC RINGS, FL 3						
Current Mailing Address:				New Mailing Address:			
750 HAMM BLDG 19 ATLANTA,	OND DRIVE GA 30328	US					
FEI Number:	58-2279821	FEI Number Applied For (	) FEI Nur	mber Not Appl	icable ( ) Certi	ficate of Status Desire	ed ( )
Name and	Address of (	Current Registered Age	nt:	Name and	Address of New F	Registered Agent:	
CORAL SP The above	ST ATLANTIC PRINGS, FL 3	BLVD. 3071 US submits this statement fo	r the purpose c	of changing it	ts registered office o	or registered agent,	or both,
in the State							
SIGNATURE: Electronic Signature of Registered Agent						Date	<del></del>
Election Carr		g Trust Fund Contribution (	•				
OFFICERS	AND DIREC	TORS:		ADDITION	S/CHANGES TO C	FFICERS AND DI	RECTORS:
Title: Name: Address: City-St-Zip:	P ( ENGLE, KEVIN 750 HAMMONI ATLANTA, GA	D DR BLDG 19		Title: Name: Address: City-St-Zip:		ge ( ) Addition	
Title: Name: Address: City-St-Zip:	T ( CAPPS, C B 750 HAMMONI ATLANTA, GA			Title: Name: Address: City-St-Zip:	()Chan	ge ( ) Addition	
Title: Name: Address: City-St-Zip:	EYSTER, MICH	ID DRIVE, STE 10		Title: Name: Address: City-St-Zip:	S (X) Chan QUINN, JOHN J 1012 WEST 8TH AVE KING OF PRUSSIA, P		
Title: Name: Address: City-St-Zip:	MCCOY, CHRI	L COMMONS BLVD #550		Title: Name: Address: City-St-Zip:	()Chan	ge ( ) Addition	
Title: Name: Address: City-St-Zip:	DEVILLE, DAV	MELBACK RD., SUITE 510		Title: Name: Address: City-St-Zip:	D (X) Chan OUZTS, DONALD L 750 HAMMOND DRIV ATLANTA, GA 30328	ge()Addition E, BLDG 19	
Title: Name: Address: City-St-Zip:	EVANS, WENC	D DRIVE, BLDG 19		Title: Name: Address: City-St-Zip:	()Chan	ge ( ) 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: C. BRUCE CAPPS T 03/30/2005