2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G36425

FILED Jan 13, 2005 Secretary of State

Entity Name: ENABLING TECHNOLOGIES, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1601 NE BRAILLE PL JENSEN BEACH, FL 34957 US					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
1601 NE BRAILLE PL JENSEN BEACH, FL 34957 US					
FEI Number: 59-2503431 FEI Number Applied For () FEI Number			FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
BOND, JAMES A., P.A. FIRST NATIONAL BANK BUILDING, SUITE 4 1251 S.W. 27TH STREET PALM CITY, FL 34990 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:					
	Electronic	Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDI			ADDITIONS/CHANG	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (X) DO SMITH, CHUCK 3739 SE DOUBLE STUART, FL 3499	TON DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	C () De ROWE, KEITH 4012 SE FAIRWA' STUART, FL 3499	/ WEST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VTD () De KIMBROUGH, BRA 1601 NE BRAILLE JENSEN BEACH, F	ADLEY T PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PSD () De SCHENK, ROBER 1601 NE BRAILLE JENSEN BEACH, F	ΓA PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () De LAYCOCK, TODD 33 FLAGLER AVEI STUART, FL 3499	NUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) DO PORTER, JACK 777 SOUTH FLAG WEST PALM BEAC	LER DRIVE, SUITE 901W	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: ROBERT A SCHENK PSD 01/13/2005