2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G47875

Entity Name: HI-TEC ASSOCIATES, INC.

FILED Mar 23, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5300 S FLORIDA AVE. UNIT G3 PO BOX 5526 (ZIP 33807) LAKELAND, FL 33813

Current Mailing Address: New Mailing Address:

5300 S FLORIDA AVE. UNIT G3 PO BOX 5526 (ZIP 33807) LAKELAND, FL 33813

FEI Number: 59-2296628 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GONZALEZ, JOSEPH M.
5332 GLENMORE DRIVE
LAKELAND, FL 33803 US
GONZALEZ, JOSEPH M.
5300 S. FLORIDA AVENUE
SUITE G3
LAKELAND, FL 33813 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: 03/23/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition GONZALEZ, JOSEPH M., GONZALEZ, JOSEPH M., Name: Name: 5332 GLENMORE DRIVE 5300 S FLORIDA AVE, SUITE G3 Address: Address: City-St-Zip: LAKELAND, FL City-St-Zip: LAKELAND, FL

Title: VTD () Delete Title: () Change () Addition

 Name:
 REED, CHARLES W.,
 Name:

 Address:
 5340 LOCH PLACE
 Address:

 City-St-Zip:
 LAKELAND, FL
 City-St-Zip:

Title: VSD () Delete Title: () Change () Addition

Name:BRADLEY, ALAN S.,Name:Address:7505 SOMERSET SHORES COURTAddress:City-St-Zip:ORLANDO, FL 32819 USCity-St-Zip:

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: CHARLES DIGGS CFO 03/23/2005