2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G91838

Entity Name: TRACY CONSULTANTS, INC.

FILED Jan 04, 2005 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:				
4660 S.W. 128TH AVENUE FORT LAUDERDALE, FL 33330					4660 S.W. 128TH AVENUE SOUTHWEST RANCHES, FL 33330				
Current Mailing Address:					New Mailing Address:				
4660 S.W. 128TH AVENUE FORT LAUDERDALE, FL 33330					4660 S.W. 128TH AVENUE SOUTHWEST RANCHES, FL 33330				
FEI Number:	59-2422100	FEI Numb	er Applied For () F	El Num	ber Not Appli	cable ()	Certificate of S	tatus Desired (X)	
Name and Address of Current Registered Agent: Name						Name and Address of New Registered Agent:			
TRACY, ROBERT 4660 S.W. 128TH AVENUE FORT LAUDERDALE, FL 33330 US					TRACY, ROBERT 4660 S.W. 128TH AVENUE SOUTHWEST RANCHES, FL 33330 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:					01/04/2005				
Electronic Signature of Registered Agent					Date				
Election Campaign Financing Trust Fund Contribution (X).									
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PD () D TRACY, ROBERT 4660 SW 128TH A FORT LAUDERDA	AVENUE			Title: Name: Address: City-St-Zip:	TRACY, ROE 4660 SW 12	(X) Change () Addi BERT, 8TH AVENUE T RANCHES, FL	ition	
Title: Name: Address: City-St-Zip:	VD () C STRAUGHN, SHA 201 TURKEY LAN SEBRING, FL				Title: Name: Address: City-St-Zip:		()Change ()Addi	tion	
Title: Name: Address: City-St-Zip:	D () D TRACY, SCOTT 8460 SW 181ST MIAMI, FL	Oelete ST.			Title: Name: Address: City-St-Zip:		()Change ()Addi	tion	
Title: Name: Address: City-St-Zip:	D () C TRACY, GREGOR 4660 SW 128 AV FT. LAUDERDALE	E.	0 US		Title: Name: Address: City-St-Zip:		()Change ()Addi	tion	
Title: Name: Address:	D () D TRACY, JR. R 4660 SW 128 AV	elete E.			Title: Name: Address:	D TRACY, JR. 4660 SW 12		ition	

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT N. TRACY PD 01/04/2005

FT. LAUDERDALE, FL 33330 US

() Delete

FT. LAUDERDALE, FL 33330 US

TRACY, WILLIAM

4660 SW 128 AVE.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

SOUTHWEST RANCHES, FL 33330 US

SOUTHWEST RANCHES, FL 33330 US

TRACY, WILLIAM

4660 SW 128 AVE.

(X) Change () Addition