

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H17245

Entity Name: FOLLOWTHRU, INCORPORATED

FILED
Jan 03, 2005
Secretary of State

Current Principal Place of Business:

701 ENTERPRISE RD EAST
#502
SAFETY HARBOR, FL 34695

New Principal Place of Business:

Current Mailing Address:

2701 ENTERPRISE RD EAST
#502
SAFETY HARBOR, FL 34695

New Mailing Address:

701 ENTERPRISE RD EAST
#502
SAFETY HARBOR, FL 34695

FEI Number: 59-2436848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, WILLIAM J
2679 SABAL SPRING CIRCLE
#E-205
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

CAMPBELL, WILLIAM J
2679 SABAL SPRING CIRCLE
#E-205
CLEARWATER, FL 33761 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: WILLIAM J. CAMPBELL

01/03/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAMPBELL, WILLIAM J.,
Address: 2679 SABAL SPNG CIR E205
City-St-Zip: CLEARWATER, FL

Title: STD () Delete
Name: CAMPBELL, JEAN E.,
Address: 2679 SABAL SPNG CIR E205
City-St-Zip: CLEARWATER, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAMPBELL, WILLIAM J.,
Address: 2679 SABAL SPNG CIR E205
City-St-Zip: CLEARWATER, FL 33761

Title: STD (X) Change () Addition
Name: CAMPBELL, JEAN E.,
Address: 2679 SABAL SPNG CIR E205
City-St-Zip: CLEARWATER, FL 33761

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: WILLIAM J. CAMPBELL

PD

01/03/2005

Electronic Signature of Signing Officer or Director

Date