

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H24796

FILED
Apr 26, 2005
Secretary of State

Entity Name: BUILDING AUTOMATION, INCORPORATED

Current Principal Place of Business:

4769 NE 11TH AVE
OAKLAND PARK, FL 33334 US

New Principal Place of Business:

5075 NE 12TH AVENUE
OAKLAND PARK, FL 33334 US

Current Mailing Address:

P.O. BOX 339
MOORE HAVEN, FL 33471 US

New Mailing Address:

FEI Number: 59-2451437 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURLESON, ERLIE
4769 NE 11TH AVENUE
FT. LAUDERDALE, FL 33334 US

Name and Address of New Registered Agent:

BURLESON, ERLIE
5075 NE 12TH AVENUE
FT. LAUDERDALE, FL 33334 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:

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SC () Delete
Name: BURLESON, ERLIE,
Address: P.O. BOX 339
City-St-Zip: MOORE HAVEN, FL 33471

Title: PTD () Delete
Name: BURLESON, GERALDINE,
Address: P.O. BOX 339
City-St-Zip: MOORE HAVEN, FL 33471

Title: VPD () Delete
Name: GANNON, THOMAS D
Address: 963 WEST RIVER DRIVE
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPTD (X) Change () Addition
Name: BURLESON, GERALDINE,
Address: P.O. BOX 339
City-St-Zip: MOORE HAVEN, FL 33471

Title: PD (X) Change () Addition
Name: GANNON, THOMAS D
Address: 963 WEST RIVER DRIVE
City-St-Zip: MARGATE, FL 33063

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: GERALDINE BURLESON

VP

04/26/2005

Electronic Signature of Signing Officer or Director

Date