

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H89591

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: AGENTS RESEARCH, INC.

## Current Principal Place of Business:

3234 LAKE PADGETT DRIVE  
LAND O LAKES, FL 34639 US

## New Principal Place of Business:

1841 FALLING STAR LANE  
LUTZ, FL 33549 US

## Current Mailing Address:

PO BOX 1758  
LAND O LAKES, FL 34639 US

## New Mailing Address:

FEI Number: 59-2618229      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GENTRY, MARILYN  
3234 LAKE PADGETT DR  
LAND O LAKES, FL 34639 US

## Name and Address of New Registered Agent:

GENTRY, MARILYN  
1841 FALLING STAR LANE  
LUTZ, FL 33549 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:

01/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: GENTRY, MARILYN,  
Address: 3234 LAKE PADGETT DRIVE  
City-St-Zip: LAND O LAKES, FL

Title: DV ( ) Delete  
Name: GENTRY, LEWYS E.,  
Address: 3234 LAKE PADGETT DRIVE  
City-St-Zip: LAND O LAKES, FL

Title: D ( ) Delete  
Name: VALDES, VICKY  
Address: 3234 LAKE PADGETT DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: GENTRY, MARILYN,  
Address: 1841 FALLING STAR LANE  
City-St-Zip: LUTZ, FL 33549 US

Title: DV (X) Change ( ) Addition  
Name: GENTRY, LEWYS E.,  
Address: 1841 FALLING STAR LANE  
City-St-Zip: LUTZ, FL 33549 US

Title: D (X) Change ( ) Addition  
Name: VALDES, VICKY  
Address: 15358 LOG CABIN  
City-St-Zip: DETROIT, MI 48238 US

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: MARILYN GENTRY

DP

01/06/2005

Electronic Signature of Signing Officer or Director

Date