

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 21, 2005 8:00 am
Secretary of State

07-21-2005 90026 005 ***150.00

DOCUMENT # H90970

1. Entity Name

ODUMS, INC.



Principal Place of Business

394 STATE ROAD #7
WEST PALM BEACH FL 33414

Mailing Address

P.O. BOX 210247
ROYAL PALM BEACH FL 33421

2. Principal Place of Business

13961 ONEEC H. Ave Plvo

3. Mailing Address

Suite, Apt. #, etc.

1000 Wadsworth, 71.

Suite, Apt. #, etc.

City & State

City & State

7in 33470

Country

Zip

Country

1st MOORE

CR2E034 (10/04)

4. FEI Number 59-2684466

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ODUMS, PHEASCHER W JR
9919 PIONEER RD
WEST PALM BEACH FL 33414

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

16607 7600 Rd N

City Lota Wadsworth

FL

Zip Code 33470

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME ODUMS, PHEASCHER W JR
STREET ADDRESS 9919 PIONEER RD
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 16607 7600 Rd N
CITY-ST-ZIP Lota Wadsworth, 71 33470

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

7/18/05

561-333-7416

Date

Daytime Phone #

ATTACHMENT

H90920

Odums Inc. 50056546
13961 Okeechobee Blvd
Loxahatchee, FL 33470
561-795-9093

July 18, 2005

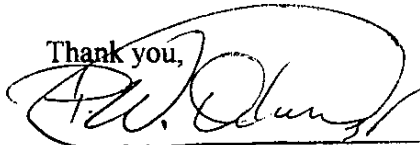
Division of Corporations
Annual Report Section
P.O. Box 6850
Tallahassee, FL 32314

Dear Sir,

Back in November of 2004, Odums Inc. filed a report because we didn't receive a annual notice and we had to pay \$750.00. (see check #7750 dated November 5, 2004). We did not receive a notice prior to May 1st, 2005 and therefore, we are enclosing a check for \$150.00.

Please mail all future notices/correspondence to P.O. Box 210247, Royal Palm Beach, FL 33421 to ensure that we receive it on time.

Thank you,



P. W. Odums, Jr
President