

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J26204

FILED
Apr 06, 2005
Secretary of State

Entity Name: POWELL'S CUSTOM METAL FABRICATIONS, INC.

Current Principal Place of Business:

2900 CANAL STREET
JACKSONVILLE, FL 32209 US

New Principal Place of Business:

Current Mailing Address:

2900 CANAL STREET
JACKSONVILLE, FL 32209 US

New Mailing Address:

FEI Number: 59-2690832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, SALLY D
2900 CANAL STREET
JACKSONVILLE, FL 32209 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: POWELL, EDWARD R SR
Address: 159 MALLARD COURT
City-St-Zip: BANNER ELK, NC 28604

Title: DP () Delete
Name: POWELL, SALLY D.,
Address: 4020 PONCE DE LEON AVENUE
City-St-Zip: JACKSONVILLE, FL 32217

Title: ST () Delete
Name: BROWN, BILLIE JO
Address: 1547 GRADUATION LANE
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: POWELL, EDWARD R SR
Address: PO BOX 1805
City-St-Zip: BANNER ELK, NC 28604

Title: DP (X) Change () Addition
Name: POWELL, SALLY D.,
Address: 10901 BURNT MILL ROAD #2601
City-St-Zip: JACKSONVILLE, FL 32256

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

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: SALLY D POWELL

DP

04/06/2005

Electronic Signature of Signing Officer or Director

Date