2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J41503

Entity Name: CFO INTERNATIONAL, INCORPORATED

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5643 MONTE ROSSO ROAD 4203 CARRIAGE DRIVE SARASOTA, FL 34243 US SARASOTA, FL 34241 US

Current Mailing Address: New Mailing Address:

5318 E. DESERT VISTA ROAD 4743 E. ROAD RUNNER PLACE PARADISE VALLEY, AZ 85253 US PARADISE VALLEY, AZ 85253 US

FEI Number: 59-2735883 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NODHOLM, DONALD M
5643 MONTE ROSSO ROAD
5ARASOTA, FL 34243 US

NODHOLM, DONALD M
4203 CARRIAGE DRIVE
SARASOTA, FL 34241 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: 04/27/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition

Name: TAYLOR, WAYNE L
Address: 5318 E. DESERT VISTA ROAD
Name: TAYLOR, WAYNE L
Address: 4743 E. ROAD RUNNER PLACE

City-St-Zip: PARADISE VALLEY, AZ 85253 US City-St-Zip: PARADISE VALLEY, AZ 85253 US

Title: SD () Delete Title: SD (X) Change () Addition

Name: TAYLOR, MICHELLE Name: TAYLOR, MICHELLE

Address: 5318 E. DESERT VISTA ROAD Address: 4743 E. ROAD RUNNER PLACE
City-St-Zip: PARADISE VALLEY, AZ 85253 US City-St-Zip: PARADISE VALLEY, AZ 85253 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: WAYNE L. TAYLOR P 04/27/2005