

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2005 08:00 AM
Secretary of State

DOCUMENT # J75647	
1. Entity Name C. T. EARLE CORPORATION	
Principal Place of Business 7001 GIBSONTON DR, GIBSONTON, FL 33534 P.O. BOX 733 RIVERVIEW, FL 33568 US	Mailing Address 7001 GIBSONTON DR, GIBSONTON, FL 33534 P.O. BOX 733 RIVERVIEW, FL 33568 US



03102005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2817813	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EARLE, CHARLES T.
7001 GIBSONTON DR
GIBSONTON, FL 33534

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE Registered Agent signature required when re-filing) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

1000000309927
04/16/05-80057-013 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP EARLE, CHARLES T 7001 GIBSONTON DR GIBSONTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST EARLE, CHARLES T JR 2204 AZEELE ST. TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP WALDEN, FREDERICK S 7001 GIBSONTON DR GIBSONTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV MITCHELL, ALLAN ROBERT 7001 GIBSONTON DRIVE GIBSONTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Earle 4-13-05 813-376-8009