


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90051 046 ***150.00

DOCUMENT # K50232
 1. Entity Name
ECOMETRY CORPORATION



Principal Place of Business Mailing Address
 1615 SOUTH CONGRESS AVE 1615 SOUTH CONGRESS AVE
 DELRAY BEACH, FL 33445-6368 US DELRAY BEACH, FL 33445-6368 US

40017956



2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 200

02102005 Chg-P CR2E034 (10/03)

City & State City & State

4. FEI Number Applied For
 65-0090038 Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent
MARRAH, JOHN
 1615 SOUTH CONGRESS AVENUE
 DELRAY BEACH, FL 33445-6368

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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: *John Marrah* **John Marrah President & CEO** **2/10/05**
(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

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

10. OFFICERS AND DIRECTORS

TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	SMITH, WILBURN W	
STREET ADDRESS	1615 SOUTH CONGRESS AVE	San
CITY-ST-ZIP	DELRAY BEACH, FL 334456368	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GARDNER, ALLAN J	
STREET ADDRESS	1615 SOUTH CONGRESS AVE	
CITY-ST-ZIP	DELRAY BEACH, FL 334456368	
TITLE	P	<input type="checkbox"/> Delete
NAME	MARRAH, JOHN	
STREET ADDRESS	1615 CONGRESS AVE	Suite 200
CITY-ST-ZIP	DELRAY BEACH, FL 33445	
TITLE	V	<input type="checkbox"/> Delete
NAME	CRENSHAW, JOY	
STREET ADDRESS	1615 CONGRESS AVE	Suite 200
CITY-ST-ZIP	DELRAY BEACH, FL 33445	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sean Kerrigan	
STREET ADDRESS	1615 S. Congress Ave Suite 200	
CITY-ST-ZIP	DeLray Beach FL 33445	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *John Marrah* **John Marrah President & CEO** **2/10/05** **561245-2700**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #