

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K51154

FILED  
Mar 28, 2005  
Secretary of State

Entity Name: GLENROE TECHNOLOGIES, INC.

## Current Principal Place of Business:

1912 44TH AVENUE EAST  
BRADENTON, FL 34203 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 908  
TALLEVAST, FL 342707908

## New Mailing Address:

1912 44TH AVENUE EAST  
BRADENTON, FL 34203

FEI Number: 65-0091852

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOZMAN, SHARON A.  
4809 RIVERVIEW BLVD.  
BRADENTON, FL 34209 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: STD ( ) Delete  
Name: BOZMAN, SHARON A.,  
Address: 4809 RIVERVIEW BLVD.  
City-St-Zip: BRADENTON, FL

Title: PD ( ) Delete  
Name: BOZMAN III, JOHN F.,  
Address: 4809 RIVERVIEW BLVD.  
City-St-Zip: BRADENTON, FL

Title: V (X) Delete  
Name: BOZMAN IV, JOHN F  
Address: 228 16TH AVENUE NE  
City-St-Zip: SAINT PETERSBURG, FL 33704

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: SHARON A BOZMAN

STD

03/28/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date