

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L90443

FILED
Apr 27, 2005
Secretary of State

Entity Name: TREVOR-MARTIN CORPORATION

Current Principal Place of Business:

4151 112TH TERRACE NORTH
CLEARWATER, FL 33762 US

New Principal Place of Business:

Current Mailing Address:

4151 112TH TERRACE NORTH
CLEARWATER, FL 33762 US

New Mailing Address:

FEI Number: 59-3026647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOVELACE, WILLIAM K
401 S LINCOLN AVE
CLEARWATER, FL 33756 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: P/D () Delete
Name: BORZONI, JOHN T
Address: 9066 CYPRESS TRAIL
City-St-Zip: LARGO, FL 33777 US

Title: VSD () Delete
Name: BINDUS, SHELIA A
Address: 10255 MYRTLE OAK LANE
City-St-Zip: LARGO, FL 33777 US

Title: T () Delete
Name: BORZONI, ELIZABETH H
Address: 9066 CYPRESS TRAIL
City-St-Zip: LARGO, FL 33777 US

Title: D () Delete
Name: BORZONI, GLADYS W
Address: 100 BLUFFVIEW DRIVE
City-St-Zip: BELLEAIR BLUFFS, FL 33770 US

Title: D () Delete
Name: WILLIAMSON, RICHARD P
Address: 1984 ORANGE COURT
City-St-Zip: PALM HARBOR, FL 34683 US

Title: D () Delete
Name: GALLAGHER, MARY K
Address: 672 POINSETTIA RD
City-St-Zip: BELLEAIR, FL 33756 US

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:

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: SHEILA A. BINDUS

VSD

04/27/2005

Electronic Signature of Signing Officer or Director

Date