

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M97646

FILED
Feb 24, 2005
Secretary of State

Entity Name: PHELPS MACHINE RESEARCH & DEVELOPMENT, INC.

Current Principal Place of Business:

22330 CR 455
HOWEY IN HILLS, FL 347374516

New Principal Place of Business:

Current Mailing Address:

PO BOX 253
HOWEY IN THE HILLS, FL 347370253

New Mailing Address:

FEI Number: 59-2913903

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHELPS, GAIL B
22330 COUNTY RD 455
HOWEY IN THE HILLS, FL 34737 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: VP () Delete
Name: PHELPS, WARREN A.,
Address: 22330 COUNTRY RD 455
City-St-Zip: HOWEY IN THE HILLS, FL 34737

Title: P () Delete
Name: PHELPS, GAIL B.,
Address: 22330 COUNTRY RD 455
City-St-Zip: HOWEY IN THE HILLS, FL 34737

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: PHELPS, WARREN A.,
Address: 22330 COUNTRY RD 455
City-St-Zip: HOWEY IN THE HILLS, FL 347374516

Title: P (X) Change () Addition
Name: PHELPS, GAIL B.,
Address: 22330 COUNTRY RD 455
City-St-Zip: HOWEY IN THE HILLS, FL 347374516

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: GAIL B. PHELPS

PRES

02/24/2005

Electronic Signature of Signing Officer or Director

Date