

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000228

FILED
Feb 08, 2005
Secretary of State

Entity Name: ARIAS, INC.

Current Principal Place of Business:

1630 REGATTA DRIVE
AMELIA ISLAND, FL 32034

New Principal Place of Business:

10 MARSH HAWK
FERNANDINA BEACH, FL 320346423 US

Current Mailing Address:

ARIAS-JSO
BOX 8134
FERNANDINA BEACH, FL 323058134

New Mailing Address:

ARIAS
BOX 8134
FERNANDINA BEACH, FL 323058134 US

FEI Number: 59-3657121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRISACH, E. M.
10 MARSH HAWK
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

BRISACH, E. M.
10 MARSH HAWK
FERNANDINA BEACH, FL 320346423 US

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: E. M. BRISACH

02/08/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: BILLINGS, JOHN
Address: 734 OCEAN CLUB PLACE
City-St-Zip: FERNANDINA, FL 32034

Title: PD (X) Delete
Name: SPANIEL, SHIRLEY
Address: 1630 REGATTA DRIVE
City-St-Zip: AMELIA ISLAND, FL 32034

Title: TD () Delete
Name: BRISACH, E.M.
Address: 10 MARSH HAWK
City-St-Zip: FERNANDINA, FL 32034

Title: SD () Delete
Name: JONES, NANCY
Address: 732 OCEAN CLUB PLACE
City-St-Zip: FERNANDINA, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BILLINGS, JOHN
Address: 734 OCEAN CLUB PLACE
City-St-Zip: FERNANDINA, FL 32034

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

Title: TD (X) Change () Addition
Name: BRISACH, E. M.
Address: 10 MARSH HAWK
City-St-Zip: FERNANDINA, FL 32034

Title: D (X) Change () Addition
Name: ZIMMERMAN, TOM
Address: 6 FISHHAWK
City-St-Zip: FERNANDINA, FL 32034

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: E. M. BRISACH

TD

02/08/2005

Electronic Signature of Signing Officer or Director

Date