

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000966

FILED
May 24, 2005
Secretary of State

Entity Name: FORTHCOMING INDUSTRIES, INC.

Current Principal Place of Business:

4845 FOXWOOD CIRCLE
WEST PALM BEACH, FL 33417

New Principal Place of Business:

Current Mailing Address:

4845 FOXWOOD CIRCLE
WEST PALM BEACH, FL 33417

New Mailing Address:

FEI Number: 02-0544513 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FULWOOD, CASSANDRA V
4845 FOXWOOD CIRCLE
WEST PALM BEACH, FL 33417 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FULWOOD, CASSANDRA
Address: 4845 FOXWOOD CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33417

Title: VD () Delete
Name: MORAN, GRETA
Address: 605 KINGS LANE SW
City-St-Zip: WINTER HAVEN, FL 338780

Title: SD () Delete
Name: O'NEILL, RUTH
Address: 755 HUMMINGBIRD WAY #8
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: KELLY, CAROLYN
Address: 6845 PEPPERMILL LANE
City-St-Zip: COLLEGE PARK, GA 30349

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

SIGNATURE: CASSANDRA FULWOOD

PD

05/24/2005

Electronic Signature of Signing Officer or Director

Date