

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002805

FILED
Jun 29, 2005
Secretary of State

Entity Name: ESPALER, INC.

Current Principal Place of Business:

201 N UNIVERSITY DR
STE 113
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

201 N UNIVERSITY DR
STE 113
PLANTATION, FL 33324 US

New Mailing Address:

FEI Number: 04-3644851 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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: REID, JOHN C
Address: 2513 SAPLING CIRCLE
City-St-Zip: WIMINGTON, NC 28411

Title: TD () Delete
Name: STONE-REID, GLORIA M
Address: 2513 SAPLING CIRCLE
City-St-Zip: WILMINGTON, NC 28411

Title: D () Delete
Name: STONE, HARLAN
Address: 1817 CLEVELAND STREET
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: REID, JOHN C
Address: 1935 18TH AVE
City-St-Zip: VERO BEACH, FL 32960

Title: TD (X) Change () Addition
Name: STONE-REID, GLORIA M
Address: 1935 18TH AVE
City-St-Zip: VERO BEACH, FL 32960

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: JOHN C. REID

PSD

06/29/2005

Electronic Signature of Signing Officer or Director

Date