

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002079

FILED
Jul 25, 2005
Secretary of State

Entity Name: AXIS ONE, INC.

Current Principal Place of Business:

1264 CYPRESS WOODS DR.
NAPLES, FL 34103

New Principal Place of Business:

2335 9TH STREET NORTH
404
NAPLES, FL 34103

Current Mailing Address:

1264 CYPRESS WOODS DR.
NAPLES, FL 34103

New Mailing Address:

PO BOX 11206
NAPLES, FL 34101

FEI Number: 20-0787316 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

RYAN, FRITZI J
1264 CYPRESS WOODS DR.
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

RYAN, JEFFREY E
2335 9TH STREET NORTH
SUITE 404
NAPLES, FL 34101 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: JEFFREY E RYAN

07/25/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RYAN, JEFFREY E
Address: 1264 CYPRESS WOODS DR.
City-St-Zip: NAPLES, FL 34103 US

Title: TRES () Delete
Name: FREEMAN, VICTORIA
Address: 1469 ST. CLAIR SHORE RD
City-St-Zip: NAPLES, FL 34104 US

Title: VP () Delete
Name: SHAVER, DAVE
Address: 157 EAST STREET, SUITE 116
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: VP () Delete
Name: MONEY, DAVE
Address: 839 W ST. AUGUSTINE STREET, BACK
City-St-Zip: TALLAHASSEE, FL 32304 US

Title: SEC () Delete
Name: CRAWFORD, BUD
Address: 900 N. APPALACHIAN TERR.
City-St-Zip: CRYSTAL RIVER, FL 34429 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: VP (X) Change () Addition
Name: JONES, PETRA
Address: 2335 9TH STREET NORTH
City-St-Zip: NAPLES, FL 34103 US

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: JEFFREY E RYAN

P

07/25/2005

Electronic Signature of Signing Officer or Director

Date