

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010586

FILED
Apr 29, 2005
Secretary of State

Entity Name: PRIMUS 1V AND ASSOCIATES INTERNATIONAL, INC.

Current Principal Place of Business:

411 N. MARTIN LUTHER KING BLVD.
DAYTONA BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

411 N. MARTIN LUTHER KING BLVD.
DAYTONA BEACH, FL 32174

New Mailing Address:

FEI Number: 20-2213656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRIVUS, WILLIAM
411 N. MARTIN LUTHER KING BLVD.
DAYTONA BEACH, FL 32174 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: PD () Delete
Name: PRIMUS, WILLIAM
Address: 411 N. MARTIN LUTHER KING BLVD.
City-St-Zip: DAYTONA BEACH, FL 32174

Title: VD () Delete
Name: PRIMUS-COTTON, B J
Address: 528 FRED GAMBLE WAY
City-St-Zip: ORMOND BEACH, FL 32174

Title: TD () Delete
Name: PRIMUS, BRENT
Address: 3811 N.W. 7TH PLACE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: S () Delete
Name: WALKER, ROBYN H
Address: 1129 GOLFVIEW DR.
City-St-Zip: DAYTONA BEACH, FL 32114

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: () 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: WILLIAM PRIMUS

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date