

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011066

FILED
Apr 12, 2005
Secretary of State

Entity Name: RESOUND INTERNATIONAL, INC.

Current Principal Place of Business:

88 MARYLAND ST
WHEELING, WV 26003

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 494
WHEELING, WV 33446

New Mailing Address:

FEI Number: 84-1663098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
103 N MERIDIAN ST
TALLAHASSEE, FL 32301 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: P () Delete
Name: THEMELARAS, WILLIAM
Address: 88 MARYLAND ST.
City-St-Zip: WHEELING, WV 26003

Title: S () Delete
Name: THEMELARAS, LEONARDA
Address: 88 MARYLAND ST.
City-St-Zip: WHEELING, WV 26003

Title: T () Delete
Name: DUNN, MICAH
Address: 1903 MARSHALL ST.
City-St-Zip: BENWOOD, WV 26031

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:

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 THEMELARAS

P

04/12/2005

Electronic Signature of Signing Officer or Director

Date