

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000025920

Entity Name: ALLTECH SPECIALISTS, INC.

FILED
Jul 19, 2005
Secretary of State

Current Principal Place of Business:

9547 E. FOWLER AVE.
THONOTOSASSA, FL 33592

New Principal Place of Business:

Current Mailing Address:

9547 E. FOWLER AVE.
THONOTOSASSA, FL 33592

New Mailing Address:

4600 ROBERTS RD
LAND O LAKES, FL 34639

FEI Number: 59-3632157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE ACCESS, INC.
236 E. 6TH AVENUE
TALLAHASSEE, FL 32303 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: ADAMS, VICTOR J
Address: 9547 E. FOWLER AVE.
City-St-Zip: THONOTOSASSA, FL 33592

Title: COO () Delete
Name: GREEN, BRIAN C
Address: 9547 E. FOWLER AVE.
City-St-Zip: THONOTOSASSA, FL 33592

Title: CFO () Delete
Name: ADAMS, SHEELEY N
Address: 9547 E. FOWLER AVE
City-St-Zip: THONOTOSASSA, FL 33592

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: COO (X) Change () Addition
Name: ADAMS, VICTOR J
Address: 9547 E. FOWLER AVE
City-St-Zip: THONOTOSASSA, FL 33592

Title: CFO (X) Change () Addition
Name: ADAMS, SHELLEY N
Address: 9547 E. FOWLER AVE
City-St-Zip: THONOTOSASSA, FL 33592

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

SIGNATURE: SHELLEY ADAMS

CFO

07/19/2005

Electronic Signature of Signing Officer or Director

Date