

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000042762

Entity Name: 2 CONSULT, INC.

FILED  
Apr 18, 2005  
Secretary of State

## Current Principal Place of Business:

258 E. ALTAMONTE DR  
SUITE 1000  
ALTAMONTE SPRINGS, FL 32701

## Current Mailing Address:

258 E. ALTAMONTE DR  
SUITE 1000  
ALTAMONTE SPRINGS, FL 32701

## New Principal Place of Business:

445 DOUGLAS AVENUE  
SUITE 2105B  
ALTAMONTE SPRINGS, FL 32714

## New Mailing Address:

445 DOUGLAS AVENUE  
SUITE 2105B  
ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-3643568

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORTIJO, VIDAL  
13221 GROVEVIEW WAY  
SANFORD, FL 32773 US

## Name and Address of New Registered Agent:

FISHER, BRYAN  
121 HARROGATE CT  
LONGWOOD, FL 32779 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: BRYAN FISHER

04/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DCEO ( ) Delete  
Name: FISHER, BRYAN W  
Address: 121 MARAGATE CT.  
City-St-Zip: LONGWOOD, FL 32779

Title: PD ( ) Delete  
Name: PERRINE, JACK L  
Address: 2118 PARK AVE  
City-St-Zip: SANFORD, FL 32771

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change ( ) Addition  
Name: FISHER, BRYAN W  
Address: 121 HARROGATE CT  
City-St-Zip: LONGWOOD, FL 32779

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

SIGNATURE: W BRYAN FISHER

DCEO

04/18/2005

Electronic Signature of Signing Officer or Director

Date