

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000047905

Entity Name: DNAPRINT GENOMICS, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

900 COCOANUT AVE
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

900 COCOANUT AVE
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 65-1013161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCNAMARA, THOMAS P PA
2909 BAY TO BAY BLVD
309
TAMPA, FL 33629 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCSO () Delete
Name: FRUDAKIS, TONY
Address: 900 COCOANUT AVE
City-St-Zip: SARASOTA, FL 34236

Title: DPCE () Delete
Name: GABRIEL, RICHARD
Address: 900 COCONUT AVE
City-St-Zip: SARASOTA, FL 34236

Title: DCMO () Delete
Name: GOMEZ, HECTOR
Address: 900 COCONUT AVE
City-St-Zip: SARASOTA, FL 34236

Title: CFOC () Delete
Name: TAMBORINI, MONICA
Address: 900 COCONUT AVE
City-St-Zip: SARASOTA, FL 34236

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

SIGNATURE: RICHARD GABRIEL

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04/29/2005

Electronic Signature of Signing Officer or Director

Date