

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000068384

FILED
Apr 29, 2005
Secretary of State

Entity Name: INTERPRECISION TECHNOLOGY, INC.

Current Principal Place of Business:

700 N COURTENAY PKWY
MERRITT ISLAND, FL 32953

New Principal Place of Business:

1241 WALNUT GROVE WAY
ROCKLEDGE, FL 32955

Current Mailing Address:

PO BOX 541004
MERRITT ISLAND, FL 329541004

New Mailing Address:

FEI Number: 59-3658134 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEVILACQUA, JOYCE H
PO BOX 541004
MERRITT ISLAND, FL 329541004 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: P () Delete
Name: BEVILACQUA, JOYCE H
Address: PO BOX 541004
City-St-Zip: MERRITT ISLAND, FL 32953

Title: VP () Delete
Name: SMITH, GRETCHEN K
Address: PO BOX 541004
City-St-Zip: MERRITT ISLAND, FL 329541004

Title: ST (X) Delete
Name: NEILL, LAWRENCE G
Address: 1301 WEST CANAL STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P T (X) Change () Addition
Name: BEVILACQUA, JOYCE H
Address: PO BOX 541004
City-St-Zip: MERRITT ISLAND, FL 32953

Title: VP S (X) Change () Addition
Name: SMITH, GRETCHEN K
Address: PO BOX 541004
City-St-Zip: MERRITT ISLAND, FL 329541004

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: JOYCE BEVILACQUA

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date