2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000081903

Entity Name: DESIGN TECHNOLOGIES CO.

FILED Apr 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10263 WHISPERING FOREST DRIVE 5136 JULINGTON FOREST LN SUITE 424 JACKSONVILLE, FL 32258

JACKSONVILLE, FL 32257

Current Mailing Address: New Mailing Address:

10263 WHISPERING FOREST DRIVE 5136 JULINGTON FOREST LN SUITE 424 JACKSONVILLE, FL 32258

JACKSONVILLE, FL 32258

JACKSONVILLE, FL 32257

FEI Number: 59-3670408 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DANIELS, THOMAS A

10263 WHISPERING FOREST DRIVE
SUITE 424
JACKSONVILLE, FL 32257 US

DANIELS, THOMAS A
5136 JULINGTON FOREST LN
JACKSONVILLE, FL 32258 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: 04/30/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: DANIELS, THOMAS A Name: DANIELS, THOMAS A

Address: 10263 WHISPERING FOREST DRIVE, SUITE 424 Address: 5136 JULINGTON FOREST LN City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete Title: D (X) Change () Addition

Name: DANIELS, SUSAN L Name: DANIELS, SUSAN L

Address: 10263 WHISPERING FOREST DRIVE, SUITE 424 Address: 5136 JULINGTON FOREST LN City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32258

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: THOMAS A DANIELS D 04/30/2005