

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000105980

Entity Name: ENTEGRA SALES, INC.

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

819 S FEDERAL HIGHWAY
SUITE 300
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

819 S FEDERAL HIGHWAY
SUITE 300
STUART, FL 34994

New Mailing Address:

FEI Number: 65-1060533

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZUMMO, ROSEMARIE
819 S FEDERAL HIGHWAY
SUITE 300
STUART, FL 34994 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: MONSON, MICHAEL
Address: 819 S FEDERAL HWY STE 300
City-St-Zip: STUART, FL 34994

Title: D () Delete
Name: JOHNSON, TERRY R
Address: 819 S FEDERAL HWY STE 300
City-St-Zip: STUART, FL 34994

Title: ST () Delete
Name: MCELWEE, KELLY
Address: 819 S FEDERAL HWY STE 300
City-St-Zip: STUART, FL 34994

Title: D () Delete
Name: JOHNSON, MARY B
Address: 819 S FEDERAL HIGHWAY SUITE 300
City-St-Zip: STUART, FL 34994

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: MICHAEL P. JOHNSON

P

04/21/2005

Electronic Signature of Signing Officer or Director

Date