


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005 08:00 AM
Secretary of State

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| DOCUMENT # P0000112506 |  |
| 1. Entity Name BARMOR INVESTMENTS, INC. | |

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| Principal Place of Business 730 E. STRAWBRIDGE AVENUE SUITE 200 MELBOURNE, FL 32935 | Mailing Address 730 E. STRAWBRIDGE AVENUE SUITE 200 MELBOURNE, FL 32935 |
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DO NOT WRITE IN THIS SPACE



04072005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 59-3685182 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

MORGAN, CLAY D
 730 E. STRAWBRIDGE AVENUE
 SUITE 200
 MELBOURNE, FL 32935

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000315247
 04/19/05-80025-003 150.00

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP MORGAN, CLAY D 730 E. STRAWBRIDGE AVENUE SUITE 200 MELBOURNE, FL 32935 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V BARBARY, PATRICK 730 E. STRAWBRIDGE AVENUE SUITE 200 MELBOURNE, FL 32935 |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Clay D. Morgan (CLAY D. MORGAN) 4-14-05 321-951-3400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #