2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 18, 2005
Secretary of State

DOCUMENT# P01000001647

Entity Name: NORTON FOLGATE, INC.

Current Principal Place of Business:

8841 W TERRY ST
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

PO BOX 1240
BONITA SPRINGS, FL 34133

New Mailing Address:

FEI Number: 59-3690170 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BARTLETT, SIMON
8841 W TERRY ST
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

CLAYBAR, TOM
8841 W TERRY ST
BONITA SPRINGS, FL 34135 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: TOM CLAYBAR 04/18/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: CLAYBAR, TOM
Address: PO BOX 111717
City-St-Zip: NAPLES, FL 34108

Title: VP ( ) Delete
Name: PITHER, ALAN
Address: SUMMERWINDS 6 PRIESTS PADDOCK
City-St-Zip: BEACONSVILLE,BUCKINGHAMSHIRE, FL HP9 1YL UK

Title: P ( ) Delete
Name: BARTLETT, SIMON
Address: 8841 W TERRY ST
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: BARTLETT, SIMON
Address: 8841 W TERRY ST
City-St-Zip: BONITA SPRINGS, FL 34135

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change ( ) Addition
Name: CLAYBAR, TOM
Address: 8841 W TERRY ST
City-St-Zip: BONITA SPRINGS, FL 34135

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: TOM CLAYBAR P 04/18/2005
Electronic Signature of Signing Officer or Director Date