2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2005
Secretary of State

DOCUMENT# P01000008366

Entity Name: RFM DESIGN ASSOCIATES, INC.

Current Principal Place of Business:

10872 S. US HWY 1
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

229 SW KENTWOOD RD.
PORT SAINT LUCIE, FL 34953

New Mailing Address:

10872 S. US HWY 1
PORT SAINT LUCIE, FL 34952

FEI Number: 65-1070068 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEGAL, BARRY G
2801 OCEAN DRIVE
SUITE 304
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

BURSON, ROBERT A P.A.
310 WEST FIRST STREET
STUART, FL 34995 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: ROBERT A. BURSON, P.A. 02/27/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: MACHEN, WENDY
Address: 229 SW KENTWOOD RD.
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: VPT ( ) Delete
Name: MACHEN, ROBERT F
Address: 229 SW KENTWOOD RD.
City-St-Zip: PORT SAINT LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: MACHEN, WENDY S
Address: 534 SW HALIBUT AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: VPT (X) Change ( ) Addition
Name: MACHEN, ROBERT F
Address: 534 SW HALIBUT AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: WENDY S. MACHEN PS 02/27/2005
Electronic Signature of Signing Officer or Director Date