

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000009151

Entity Name: WAPITI PARTNERS, INC.

FILED
Apr 20, 2005
Secretary of State

Current Principal Place of Business:

4505 BEACH PARK DRIVE
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

4505 BEACH PARK DRIVE
TAMPA, FL 33609

New Mailing Address:

502 E. PARK RD.
PLANT CITY, FL 33563

FEI Number: 59-3698672

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILLETTE, JOHN M
4505 BEACH PARK DRIVE
TAMPA, FL 33609 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: D () Delete
Name: GILLETTE, JOHN M
Address: 4505 BEACH PARK DRIVE
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: ARTHUR, THOMAS D
Address: 707 AZEELE STREET
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: ARTHUR, THOMAS D
Address: 1700 MACDILL AVE. SUITE 340
City-St-Zip: TAMPA, FL 33629

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: JOHN M GILLETTE

PRES

04/20/2005

Electronic Signature of Signing Officer or Director

Date