

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000019535

Entity Name: SYSTIX, INC.

FILED
Jan 24, 2005
Secretary of State

Current Principal Place of Business:

1850 FOREST HILL BLVD.
STE 109
WEST PALM BEACH, FL 33406

New Principal Place of Business:

1850 FOREST HILL BOULEVARD
SUITE 109
WEST PALM BEACH, FL 33406

Current Mailing Address:

1850 FOREST HILL BLVD.
STE 109
WEST PALM BEACH, FL 33406

New Mailing Address:

1850 FOREST HILL BOULEVARD
SUITE 109
WEST PALM BEACH, FL 33406

FEI Number: 65-1081241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCRACKEN, JOHN B
505 SOUTH FLAGLER DR STE 1100
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

JONES FOSTER SERVICE, LLC
505 SOUTH FLAGLER DRIVE
SUITE 1100
WEST PALM BEACH, FL 33401 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: JOHN B. MCCRACKEN, MANAGER

01/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: WILSON, MARK
Address: 11758 PARADISE COVE LN.
City-St-Zip: WELLINGTON, FL 33467

Title: DVP () Delete
Name: WILSON, BRUCE
Address: 1966 OCEAN RIDGE CIRCLE
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: WILSON, MARK
Address: 316 N.W. 17TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33069

Title: DVP (X) Change () Addition
Name: WILSON, BRUCE
Address: 1966 OCEAN RIDGE CIRCLE
City-St-Zip: VERO BEACH, FL 32963

I hereby certify that the information supplied with this filing does not qualify 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: MARK WILSON

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01/24/2005

Electronic Signature of Signing Officer or Director

Date