

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000039852

FILED
Apr 28, 2005
Secretary of State

Entity Name: CUTTER POWER EQUIPMENT, INC.

Current Principal Place of Business:

3138 SR 60 EAST
VALRICO, FL 33594

New Principal Place of Business:

403 CRATER LANE
TAMPA, FL 33619

Current Mailing Address:

3138 SR 60 EAST
VALRICO, FL 33594

New Mailing Address:

403 CRATER LANE
TAMPA, FL 33619

FEI Number: 59-3713553

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANTALA, WILLIAM
3005 BLOOMINGDALE AVE. EAST
VALRICO, FL 33594 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: VP () Delete
Name: HAM, MICHAEL A
Address: 3138 SR 60 EAST
City-St-Zip: VALRICO, FL 33594

Title: PD () Delete
Name: ANTALA, WILLIAM
Address: 3005 BLOOMINGDALE AVE. EAST
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HAM, MICHAEL A
Address: 4026 MCINTOSH ESTATES LANE
City-St-Zip: PLANT CITY, FL 33565

Title: VP (X) Change () Addition
Name: ANTALA, WILLIAM
Address: 3005 BLOOMINGDALE AVE. EAST
City-St-Zip: VALRICO, FL 33594

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: MICHAEL A. HAM

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date