2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000040584

Entity Name: TEK CORP

FILED Jun 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1102 E. NURSERY ROAD 177 HOMESTEAD COVE SANTA ROSA BCH, FL 32459 WAYNESVILLE, NC 28785

Current Mailing Address: New Mailing Address:

1102 E. NURSERY ROAD 177 HOMESTEAD COVE SANTA ROSA BCH, FL 32459 WAYNESVILLE, NC 28785

FEI Number: 59-3717752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ESPEY, TAMARA ESPEY, TAMARA VP 177 HOMESTEAD COVE 1102 E. NURSERY ROAD SANTA ROSA BEACH, FL 32459 US US WAYNESVILLE, FL 28785

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: TAMARA ESPEY 06/05/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

ESPEY, KEVIN B ESPEY, KEVIN B Name: Name: 1102 E. NURSERY RD. 177 HOMESTEAD COVE Address: Address: City-St-Zip: SANTA ROSA BCH, FL 32459 City-St-Zip: WAYNESVILLE, NC 28785

Title: DVTS () Delete Title: DVTS (X) Change () Addition

ESPEY, TAMARA N Name: Name: ESPEY, TAMARA N 1102 E. NURSERY RD. 177 HOMESTEAD COVE Address: Address: SANTA ROSA BCH, FL 32459 WAYNESVILLE, NC 28785 City-St-Zip: City-St-Zip:

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.

VΡ SIGNATURE: TAMARA ESPEY 06/05/2005