

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000095352

**FILED**  
**Jan 10, 2005**  
**Secretary of State**

**Entity Name:** POWERSALES & MARKETING, INC.

**Current Principal Place of Business:**

PO BOX 9224  
BRADENTON, FL 342069224

**New Principal Place of Business:**

8374 MARKET ST #501  
BRADENTON, FL 34202

**Current Mailing Address:**

PO BOX 9224  
BRADENTON, FL 342069224

**New Mailing Address:**

8374 MARKET ST #501  
BRADENTON, FL 34202

**FEI Number:** 65-1147542

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POWERS, LILLI S  
9815 SWEETWATER AVE  
BRADENTON, FL 34202 US

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

POWERS, LILLI S  
7514 HARRINGTON LN  
BRADENTON, FL 34202 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: \_\_\_\_\_

01/10/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: POWERS, JAMES T  
Address: 9815 SWEETWATER AVE  
City-St-Zip: BRADENTON, FL 34202

Title: VP ( ) Delete  
Name: POWERS, LILLI S  
Address: 9815 SWEETWATER AVE  
City-St-Zip: BRADENTON, FL 34202

Title: S ( ) Delete  
Name: POWERS, TRAVER J  
Address: 4605 DEANSCROFT DR  
City-St-Zip: CHARLOTTE, NC 28226

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: POWERS, JAMES T  
Address: 7514 HARRINGTON LN  
City-St-Zip: BRADENTON, FL 34202

Title: VP (X) Change ( ) Addition  
Name: POWERS, LILLI S  
Address: 7514 HARRINGTON LN  
City-St-Zip: BRADENTON, FL 34202

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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.

SIGNATURE: JAMES T POWERS

PRES

01/10/2005

Electronic Signature of Signing Officer or Director

Date