

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000105757

Entity Name: THE POLLING COMPANY

FILED  
Apr 26, 2005  
Secretary of State

## Current Principal Place of Business:

7717 HOLIDAY DRIVE  
SARASOTA, FL 34231

## New Principal Place of Business:

8987 HUNTINGTON POINTE DRIVE  
SARASOTA, FL 34238

## Current Mailing Address:

46 NORTH WASHINGTON BLVD. #1  
SARASOTA, FL 34236

## New Mailing Address:

FEI Number: 65-1155165

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LPS CORPORATE SERVICES, INC  
46 NORTH WASHINGTON BLVD  
STE 1  
SARASOTA, FL 34236 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: DPS ( ) Delete  
Name: EDESEL, EDWARD  
Address: 7717 HOLIDAY DRIVE  
City-St-Zip: SARASOTA, FL 34231

Title: DVPT ( ) Delete  
Name: EDESEL, JOAN  
Address: 7717 HOLIDAY DRIVE  
City-St-Zip: SARASOTA, FL 34231

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: EDESEL, EDWARD  
Address: 8987 HUNTINGTON POINTE DRIVE  
City-St-Zip: SARASOTA, FL 34238

Title: DVPT (X) Change ( ) Addition  
Name: EDESEL, JOAN  
Address: 8987 HUNTINGTON POINTE DRIVE  
City-St-Zip: SARASOTA, FL 34238

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: JOAN M. EDESEL

DVPT

04/26/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date