## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000121957

Entity Name: AMERICAN ELECTROLIER, INC.

FILED Jan 20, 2005 Secretary of State

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

4445 NORTH HWY A1A 650 2ND LANE

SUITE 200 VERO BEACH, FL 32962 US VERO BEACH, FL 32963 US

Current Mailing Address: New Mailing Address:

P O BOX 4110

VERO BEACH, FL 32964 US

FEI Number: 80-0004337 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:

SEGAL, BARRY G DRNDAK, BARBARA J 2801 OCEAN DRIVE STE 204 650 2ND LANE

VERO BEACH, FL 32963 US VERO BEACH, FL 32962 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: BARBARA J. DRNDAK 01/20/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 DONNELLY, BRETT J
 Name:
 DONNELLY, BRETT J

 Address:
 4445 N. A1A, SUITE 200
 Address:
 650 2ND LANE

 City-St-Zip:
 VERO BEACH, FL 32963
 City-St-Zip:
 VERO BEACH, FL 32962

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

 Name:
 GOODE, PAUL J
 Name:
 GOODE, PAUL J

 Address:
 4445 N. A1A, SUITE 200
 Address:
 650 2ND LANE

 City-St-Zip:
 VERO BEACH, FL 32963
 City-St-Zip:
 VERO BEACH, FL 32962

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

 Name:
 ROBINSON, BARBARA
 Name:
 DRNDAK, BARBARA

 Address:
 4445 N. A1A, SUITE 200
 Address:
 650 2ND LANE

City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: VERO BEACH, FL 32962

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: BARBARA DRNDAK DST 01/20/2005