

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000000816

Entity Name: CIRCUMSPECT, INC.

FILED
May 13, 2005
Secretary of State

Current Principal Place of Business:

4730 WOODMORE RD.
LAND O LAKES, FL 34639

New Principal Place of Business:

4730 WOODMERE RD.
LAND O LAKES, FL 34639

Current Mailing Address:

19046 BRUCE B DOWNS BLVD.
PMB 119
TAMPA, FL 33647

New Mailing Address:

19046 BRUCE B DOWNS BLVD.
PMB 119
TAMPA, FL 33647

FEI Number: 30-0022205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMANIGAL, SHANNON R
4730 WOODMORE RD.
LAND O LAKES, FL 34639 US

Name and Address of New Registered Agent:

MCMANIGAL, SHANNON R
4730 WOODMERE RD.
LAND O LAKES, FL 34639 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: SHANNON MCMANIGAL

05/13/2005

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:

Title: P () Delete
Name: MCMANIGAL, SHANNON R
Address: 19046 BRUCE B DOWNS BLVD. PMB 119
City-St-Zip: TAMPA, FL 33647

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCMANIGAL, SHANNON R
Address: 19046 BRUCE B DOWNS BLVD. PMB 119
City-St-Zip: TAMPA, FL 33647

Title: VP () Change (X) Addition
Name: KIMBALL, ADRIENNE R
Address: 19046 BRUCE B DOWNS BLVD. PMB 119
City-St-Zip: TAMPA, FL 33647

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: SHANNON MCMANIGAL

P

05/13/2005

Electronic Signature of Signing Officer or Director

Date