## 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Jan 26, 2005 8:00 am **Secretary of State DOCUMENT # P02000003436** 1. Entity Name 01-26-2005 90014 014 \*\*\*150.00 NAVILLUS, INC. Principal Place of Business Mailing Address 900 9 PLACE 900 9 PLACE 40006983 VERO BEACH FL 32960 VERO BEACH FL 32960 2. Principal Place of Business 3. Mailing Address 3100 43rd Ave Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Vero Beach City & State City & State Applied For 4. FEI Number 03-0392133 Not Applicable Country Country \$8.75 Additional 32960 5. Certificate of Status Desired usAFee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SULLIVAN, CHARLES A JR Street Address (P.O. Box Number is Not Acceptable) 900 9 PLACE VERO BEACH FL 32960 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 **\$5.00** May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD hange TITLE ☐ Delete TITLE ☐ Addition SULLIVAN, CHARLES A JR. NAME NAME 3100 43rd Ave. 900 STH PLACE STREET ADDRESS STREET ADDRESS VERO BEACH FL 32960 CITY-ST-ZIP CITY-ST-7IP TITLE hange TITLE ☐ Delete Addition SULLIVAN, MICHAEL A SR. NAME NAME 3100 43rd Ave. 900 9TH PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32960 CHTY-ST-ZIP Robert C. Rothaug 3100 43rd Ave. TITLE ☐ Delete TITLE **S**ange ☐ Addition ROTHANG, ROBERT C NAME STREET ADDRESS STREET ADDRESS 900 9TH PLACE CITY-ST-ZIP CITY-ST-Z(P VERO BEACH FL 32960 TD TITLE ☐ Addition TITLE Defete 3100 43rd Ave. SULLIVAN, MICHAEL A JR. NAME 900 9TH PLACE STREET ADDRESS STREET ADDRESS VERO BEACH FL 32960 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition SULLIVAN, CHARLES A SR. NAME NAME 3100 43rd Ave. 900-9TH-PLACE STREET ADDRESS STREET ADDRESS VERO BEACH FL 32960 CITY-ST-ZIP CITY-ST-7(P Detete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the received or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

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