

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000019817

FILED
Feb 08, 2005
Secretary of State

Entity Name: GENRAY ENRICHMENT SERVICES, INC.

Current Principal Place of Business:

414 CAMPUS STREET
CELEBRATION, FL 34747

New Principal Place of Business:

Current Mailing Address:

414 CAMPUS STREET
CELEBRATION, FL 34747

New Mailing Address:

FEI Number: 72-1520865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLSON, STEPHEN J
414 CAMPUS STREET
KISSIMMEE, FL 34747 US

Name and Address of New Registered Agent:

OLSON, STEPHEN J
414 CAMPUS STREET
CELEBRATION, FL 34747 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: STEPHEN J. OLSON

02/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OLSON, STEPHEN J
Address: 414 CAMPUS STREET
City-St-Zip: CELEBRATION, FL 34747

Title: D () Delete
Name: OLSON, BARBARA
Address: 414 CAMPUS STREET
City-St-Zip: CELEBRATION, FL 34747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEPHEN J. OLSON

D

02/08/2005

Electronic Signature of Signing Officer or Director

Date