

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000022306

FILED
Apr 29, 2005
Secretary of State

Entity Name: LABYRINTH CONSULTANTS, INC.

Current Principal Place of Business:

14622 SAGAMORE COURT
FORT MYERS, FL 33908

New Principal Place of Business:

9679 CASA MAR CIRCLE
FORT MYERS, FL 33919

Current Mailing Address:

14622 SAGAMORE COURT
FORT MYERS, FL 33908

New Mailing Address:

9679 CASA MAR CIRCLE
FORT MYERS, FL 33919

FEI Number: 01-0645673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEONARD, MICHAEL W
2027 MCGREGOR BOULEVARD
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

BECKER, KIMBERLY A
9679 CASA MAR CIRCLE
FORT MYERS, FL 33919 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: KIMBERLY A BECKER

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVSD () Delete
Name: BECKER, KIMBERLY A
Address: 14622 SAGAMORE COURT
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVSD (X) Change () Addition
Name: BECKER, KIMBERLY A
Address: 9679 CASA MAR CIRCLE
City-St-Zip: FORT MYERS, FL 33919

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: KIMBERLY A BECKER

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04/29/2005

Electronic Signature of Signing Officer or Director

Date