2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000063926

City-St-Zip:

LANSING, IL 60438

Entity Name: FOWLER CONSULTING & TRAINING GROUP, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
430 NW 10 MIAMI, FL	07TH STREET 33168				
Current N	lailing Addres	s:	New Mailing Addres	New Mailing Address:	
430 NW 10 MIAMI, FL	07TH STREET 33168				
FEI Number	: 65-1183004	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:					
17100 NE	DRPORATE SU 19TH AVENUE IIAMI BEACH, F	,			
	named entity s e of Florida.	ubmits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () PERRY-FOWLE 430 NW 107TH MIAMI, FL 3316	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () FOWLER, MON 430 NW 107TH MIAMI, FL 3316	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () PERRY, JACQU 17907 S COMM		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: MARVENIA FOWLER D 04/29/2005