2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2005
Secretary of State

DOCUMENT# P02000064299

Entity Name: KLASSEN DEVELOPMENT CORPORATION

Current Principal Place of Business:

7904 SADDLENBROOK DR
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

8072 KIAWAH TRACE
PORT ST. LUCIE, FL 34986

Current Mailing Address:

7904 SADDLENBROOK DR
PORT ST. LUCIE, FL 34986

New Mailing Address:

8072 KIAWAH TRACE
PORT ST. LUCIE, FL 34986

FEI Number: 74-3052717 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KLASSEN, VICTOR H
7904 SADDLEBROOK DR
PORT ST. LUCIE, FL 34986 US

Name and Address of New Registered Agent:

KLASSEN, VICTOR H
8072 KIAWAH TRACE
PORT ST. LUCIE, FL 34986 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: 02/17/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: VICTOR, KLASSEN H
Address: 7904 SADDLEBROOK DR
City-St-Zip: PORT ST. LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: VICTOR, KLASSEN H
Address: 8072 KIAWAH TRACE
City-St-Zip: PORT ST. LUCIE, FL 34986

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: VICTOR KLASSEN P 02/17/2005
Electronic Signature of Signing Officer or Director — Date