

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000065225

FILED  
May 02, 2005  
Secretary of State

**Entity Name:** PROFESSIONAL NETWORK AND ENGINEERING SOLUTIONS, INC.

**Current Principal Place of Business:**

5200 NW 43RD STREET  
SUITE 102-123  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

5200 NW 43RD STREET  
SUITE 102-123  
GAINESVILLE, FL 32606

**New Mailing Address:**

**FEI Number:** 04-3683531

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DERINGER, ANDREA PT  
5200 NW 43RD STREET  
SUITE 102-123  
GAINESVILLE, FL 32606 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DERINGER, JONATHON D  
Address: 5200 NW 43RD STREET STE 102-123  
City-St-Zip: GAINESVILLE, FL 32606

Title: TRES ( ) Delete  
Name: DERINGER, ANDREA M PT  
Address: 5200 NW 43RD STREET STE 102-123  
City-St-Zip: GAINESVILLE, FL 32606

Title: CP (X) Delete  
Name: WEST, DONNA  
Address: 1931 NW 47TH STREET  
City-St-Zip: GAINESVILLE, FL 32605

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: JONATHON D DERINGER

MR

05/02/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date