

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000098313

FILED  
Jan 24, 2005  
Secretary of State

Entity Name: CARPE INTERNATIONAL INC.

## Current Principal Place of Business:

800 GREENBRIER LANE  
THOMASVILLE TRACE  
TALLAHASSEE, FL 323083393 US

## New Principal Place of Business:

1932 W. UNION STREET  
HERNANDO, FL 34442 US

## Current Mailing Address:

800 GREENBRIER LANE  
THOMASVILLE TRACE  
TALLAHASSEE, FL 323083393 US

## New Mailing Address:

1932 W. UNION STREET  
HERNANDO, FL 34442 US

FEI Number: 52-2880328

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COSTA, JAMES  
800 GREENBRIER LANE  
THOMASVILLE TRACE  
TALLAHASSEE, FL 323083393 US

## Name and Address of New Registered Agent:

COSTA, JAMES  
1932 W. UNION STREET  
HERNANDO, FL 34442 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:

01/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: COSTA, JAMES  
Address: 800 GREENBRIER LANE  
City-St-Zip: TALLAHASSEE, FL 323083393 US

Title: D ( ) Delete  
Name: KLEIN, MATTHEW  
Address: 10813 PALM SPRINGS DRIVE  
City-St-Zip: BOCA RATON, FL 33428 US

Title: D ( ) Delete  
Name: MENSCHING, GREGORY  
Address: 8418 S.E. MERRITT WAY  
City-St-Zip: JUPITER, FL 33458 US

Title: D (X) Delete  
Name: ERECKSON, GREGORY  
Address: 4787 HIGH GROVE ROAD  
City-St-Zip: TALLAHASSEE, FL 323092976 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: COSTA, JAMES  
Address: 1932 W. UNION STREET  
City-St-Zip: HERNANDO, FL 34442 US

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: GREG ERECKSON

D

01/24/2005

Electronic Signature of Signing Officer or Director

Date