

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90508 043 \*\*\*150.00

**DOCUMENT # P02000105474**

1. Entity Name  
**MOTION PROJECTS, INC.**



Principal Place of Business  
**3676 KENT DR  
NAPLES, FL 34112**

Mailing Address  
**3676 KENT DR  
NAPLES, FL 34112**

**20054258**



2. Principal Place of Business  
**3 Hill Spruce**  
Suite, Apt. #, etc.

3. Mailing Address  
**3 Hill Spruce**  
Suite, Apt. #, etc.

04222005 Chg-P CR2E034 (10/03)

City & State  
**Littleton, CO**

City & State  
**Littleton, CO**

4. FEI Number  
**55-0798590**

Applied For  
Not Applicable

Zip  
**80127**

Country

Zip  
**80127**

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**STOCKING, ROBERT L JR.  
3676 KENT DR  
NAPLES, FL 34112**

**7. Name and Address of New Registered Agent**

Name  
**Gruber, David M.**  
Street Address (P.O. Box Number is Not Acceptable)  
**5150 Tamiami Trail N**  
**#205**  
City  
**Naples** FL Zip Code  
**34103**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**4/22/05**  
DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D STOCKING, ROBERT L JR.** ☐ Delete  
**3676 KENT DR**  
**NAPLES, FL 34112**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D Stocking, Robert L., Jr** ☒ Change ☐ Addition  
**3 Hill Spruce**  
**Littleton, CO 80127**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
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CITY - ST - ZIP  
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NAME  
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CITY - ST - ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**Robert L. Stocking, President** **4.26.05** **720-981-1680**