2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111134

Entity Name: PSF MANUFACTURING, INC.

FILED Mar 07, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
16651 OLD FT MYERS	0 US 41 6, FL 33912				
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
16603 OLD US 41 FT MYERS, FL 33912			16651 OLD US 41 FT MYERS, FL 33912		
FEI Number:	11-3662962	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of I	Name and Address of New Registered Agent:	
PIZZUTO, SAMUEL 16603 OLD US 41 FORT MYERS, FL 33912 US			PIZZUTO, SAMUEL 16651 OLD US 41 FORT MYERS, FL 3391		
The above in the State		ubmits this statement for the po	urpose of changing its registered o	office or registered agent, or both,	
SIGNATURE: SAMUEL J. PIZZUTO				03/07/2005	
	Electroni	c Signature of Registered Age	nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VAN HOOK, JAY 6701 MEDLAR I		Title: (Name: Address: City-St-Zip:) Change()Addition	
Title: Name: Address: City-St-Zip:	MORGAN, DENI	APH CREEK LANE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	PD () PIZZUTO, SAMU 13800 HICKOR' FORT MYERS, I	Y RUN LANE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VD (X) JOHNSTON, THI 1203 WALDEN FORT MYERS, I	DRIVE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	GEIST, TRISH J	DALE CIRCLE E.	Title: (Name: Address: City-St-Zip:) 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.

SIGNATURE: TRISH J. GEIST STD 03/07/2005