2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000113757

Entity Name: MEL-RAY, INC.

FILED Apr 15, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2167 S HWY 17

CRESCENT CITY, FL 32112

Current Mailing Address: New Mailing Address:

2167 S HWY 17 CRESCENT CITY, FL 32112

FEI Number: 55-0806116 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DAVIS, MONK, & COMPANY 906 SOUTH SR 19 PALATKA, FL 32177 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DPT () Delete

 Name:
 FOERSTER, SAMUEL F

 Address:
 518 NORTH PROSPECT ST

 City-St-Zip:
 CRESCENT CITY, FL 32112

Title: DVS () Delete
Name: FOERSTER, THOMAS J

Address: 130 FOERSTER LANE
City-St-Zip: POMONA PARK, FL 32181

Title: DPT (X) Change () Addition Name: FOERSTER, SAMUEL F

Name: FOERSTER, SAMUEL F
Address: 911 PINE TREE TERRACE
City-St-Zip: DELAND, FL 32724

Title: DVS (X) Change () Addition

Name: FOERSTER, ALICE B
Address: 911 PINE TREE TERRACE
City-St-Zip: DELAND, FL 32724

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: SAMUEL F. FOERSTER DPT 04/15/2005