2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000122562

Entity Name: PROFESSIONAL SPEAKERS GUILD INC.

APOLLO BEACH, FL 33572

City-St-Zip:

FILED Apr 04, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 919 SPINDLE PALM WAY APOLLO BEACH, FL 33572 **Current Mailing Address: New Mailing Address:** 919 SPINDLE PALM WAY APOLLO BEACH, FL 33572 FEI Number: 54-2096586 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: HODGES, WILLIAM N 919 SPINDLE PALM WAY APOLLO BEACH, FL 33572 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: () Delete Title: () Change () Addition HODGES, WILLIAM N Name: Name: 919 SPINDLE PALM WAY Address: Address: City-St-Zip: APOLLO BEACH, FL 33572 City-St-Zip: Title: Title: () Change () Addition () Delete HODGES, BILLIE P Name: Name: 919 SPINDLE PALM WAY Address: 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: WILLIAM N HODGES PRES 04/04/2005