

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000123284

Entity Name: SUMMIT CENTRAL CORP.

FILED
Mar 21, 2005
Secretary of State

Current Principal Place of Business:

3327 CINDY LN.
ENGLEWOOD, FL 34224

New Principal Place of Business:

567 PAUL MORRIS DRIVE
ENGLEWOOD, FL 34224

Current Mailing Address:

3327 CINDY LN.
ENGLEWOOD, FL 34224

New Mailing Address:

567 PAUL MORRIS DRIVE
ENGLEWOOD, FL 34224

FEI Number: 82-0572725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMB, MELISSA D
9177 FRUITLAND AVE.
ENGLEWOOD, FL 34224 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: LAMB, JAMES J
Address: 6320 HERN ST.
City-St-Zip: ENGLEWOOD, FL 34224

Title: T () Delete
Name: LAMB, MICHAEL B
Address: 9177 FRUITLAND AVE.
City-St-Zip: ENGLEWOOD, FL 34224

Title: S () Delete
Name: LAMB, CHARLES F
Address: 11285 WATERCREST AVE.
City-St-Zip: PORT CHARLOTTE, FL 33981

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAMB, JAMES J
Address: 11189 OCEANSPRAY BLVD.
City-St-Zip: ENGLEWOOD, FL 34224

Title: T (X) Change () Addition
Name: LAMB, MICHAEL B
Address: 9177 FRUITLAND AVE.
City-St-Zip: ENGLEWOOD, FL 34224

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: MICHAEL LAMB

TRES

03/21/2005

Electronic Signature of Signing Officer or Director

Date