2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000133948

City-St-Zip:

Entity Name: EASY PRO SOURCE, INC.

FILED Feb 26, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: P. O. BOX 8337 LONGBOAT KEY, FL 34228 **Current Mailing Address: New Mailing Address:** P. O. BOX 8337 LONGBOAT KEY, FL 34228 FEI Number: 33-1040992 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: DEMIKE, KERRI D 1072 TRUMAN STREET NOKOMIS, FL 34275 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: (X) Change () Addition DEMIKE, JOSEPH D DEMIKE, JOSEPH D Name: Name: P. O. BOX 8337 1072 TRUMAN STREET Address: Address: City-St-Zip: LONGBOAK KEY, FL 34228 City-St-Zip: NOKOMIS, FL 34275 () Delete Title: Title: PRES () Change (X) Addition Name: Name: SOKOLIS, THOMAS R 4640 72ND COURT EAST Address: Address: City-St-Zip: City-St-Zip: BRADENTON, FL 34203 Title: () Change (X) Addition Title: () Delete VΡ BROWN, JOAN Name: Name: P.O. BOX 8337 Address Address: City-St-Zip: City-St-Zip: LONGBOAT KEY, FL 34228 Title: () Delete Title: SEC () Change (X) Addition DEMIKE, KERRI D Name: Name: Address: Address: 1072 TRUMAN STREET

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.

City-St-Zip:

NOKOMIS, FL 34275

SIGNATURE: KERRI D. DEMIKE SEC 02/26/2005