

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000003227

**FILED**  
**Jul 15, 2005**  
**Secretary of State**

**Entity Name:** AERIAL DETECTIVE AGENCY, INC.

**Current Principal Place of Business:**

4028 B EDISON AVE  
FT. MYERS, FL 33916

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7875  
FORT MYERS, FL 33911

**New Mailing Address:**

**FEI Number:** 45-0498787

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GLOVER, WILLIAM P II  
4028 B EDISON AVE  
FT. MYERS, FL 33916 US

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

WALKER, SHARLEE M  
4028 B EDISON AVE  
FT. MYERS, FL 33916 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: SHARLEE M. WALKER

07/15/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: BAKER, LEE  
Address: 4028 B EDISON AVE  
City-St-Zip: FORT MYERS, FL 33916

Title: P ( ) Delete  
Name: GLOVER, DAVID J  
Address: 4028 B EDISON AVE  
City-St-Zip: FT. MYERS, FL 33916

Title: T ( ) Delete  
Name: GLOVER, WILLIAM  
Address: 4028 B EDISON AVE  
City-St-Zip: FT. MYERS, FL 33916

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: WALKER, PATRICK W  
Address: 4028 B EDISON AVE  
City-St-Zip: FORT MYERS, FL 33916

Title: P (X) Change ( ) Addition  
Name: WALKER, SHARLEE M  
Address: 4028 B EDISON AVE  
City-St-Zip: FT. MYERS, FL 33916

Title: T (X) Change ( ) Addition  
Name: WALKER, NICHELLE N  
Address: 4028 B EDISON AVE  
City-St-Zip: FT. MYERS, FL 33916

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: SHARLEE M. WALKER

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07/15/2005

Electronic Signature of Signing Officer or Director

Date