2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000006978

Entity Name: S. & H. MANUFACTURING, INC.

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
1663 TECHNOLOGY AVE. ALACHUA, FL 32615	
Current Mailing Address:	New Mailing Address:
1663 TECHNOLOGY AVE. ALACHUA, FL 32615	
FEI Number: 55-0814508 FEI Number Applied For () FEI Nu	mber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
SATKOWSKI, JOHN A 10836 LUSCOMBE CT. NEW PORT RICHEY, FL 34654 US	HOLT, TERESA M 851 LAKE KEMPTON DR. HAWTHORNE, FL 32640 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: TERESA M. HOLT 04/25/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Delete Title: () Change () Addition Name: SATKOWSKI, JOHN A Name:

 Name:
 SATKOWSKI, JOHN A
 Name:

 Address:
 10836 LUSCOMBE CT.
 Address:

 City-St-Zip:
 NEW PORT RICHEY, FL 34654
 City-St-Zip:

Title: STD () Delete Title: PSTD (X) Change () Addition

 Name:
 HOLT, TERESA M
 Name:
 HOLT, TERESA M

 Address:
 851 LAKE KEMPTON DR.
 Address:
 851 LAKE KEMPTON DR.

 City-St-Zip:
 HAWTHORNE, FL 32640
 City-St-Zip:
 HAWTHORNE, FL 32640

Title: D (X) Delete Title: () Change () Addition

 Name:
 SATKOWSKI, JOHN A
 Name:

 Address:
 10836 LUSCOMBE CT.
 Address:

 City-St-Zip:
 NEW PORT RICHEY, FL 34654
 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: TERESA M. HOLT PSTD 04/25/2005