## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000014635

Entity Name: FULL COVERAGE MISTING SYSTEMS, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUITE #34	EARY BOULEV 12 ION, FL 33324				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
SUITE #34	EARY BOULEV 12 ION, FL 33324				
FEI Number	: 45-0501179	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
8000 PETE SUITE #20	.ATT, LYON J ERS ROAD 10 ION, FL 33324	US			
	named entity see of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electror	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BALL, JEANNE	' BOULEVARD, SUITE #342	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BALL, BRENT	Delete ' BOULEVARD, SUITE #342 FL 33324	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: JEANNE BALL PSD 04/29/2005