

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026498

FILED
Apr 30, 2005
Secretary of State

Entity Name: ARLINGTON TRUST COMPANY

Current Principal Place of Business:

2519 MCMULLEN BOOTH RD.
SUITE 510-270
CLEARWATER, FL 33761

Current Mailing Address:

2519 MCMULLEN BOOTH RD.
SUITE 510-270
CLEARWATER, FL 33761

FEI Number: 35-2210821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

2519 MCMULLEN BOOTH RD.
SUITE 510-270
CLEARWATER, FL 33761 US

New Mailing Address:

2519 MCMULLEN BOOTH RD.
SUITE 510-270
CLEARWATER, FL 33761 US

Name and Address of Current Registered Agent:

HAYNES, PEARL O
2519 MCMULLEN BOOTH RD.
SUITE 510-270
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

TRUESDALE, RICHARD S
2519 MCMULLEN BOOTH RD.
SUITE 510-270
CLEARWATER, FL 33761 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: RICHARD S. TRUESDALE

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: O'HAYNES, PETER
Address: 9 VILLA CT
City-St-Zip: SAFETY HARBOR, FL 34695

Title: S () Delete
Name: TRUESDALE, RICHARD
Address: 9 VILLA CT
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TRUESDALE, RICHARD S
Address: 9 VILLA CT
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: S (X) Change () Addition
Name: TRUESDALE, RICHARD
Address: 9 VILLA CT
City-St-Zip: SAFETY HARBOR, FL 34695 US

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: RICHARD S. TRUESDALE

PRES

04/30/2005

Electronic Signature of Signing Officer or Director

Date