

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000053644

FILED
Mar 20, 2005
Secretary of State

Entity Name: CONSOLIDATED DISTRIBUTORS INC.

Current Principal Place of Business:

3715 WINDERWOOD DR.
SARASOTA, FL 34232

New Principal Place of Business:

7308 MAUNA LOA BLVD
SARASOTA, FL 34241

Current Mailing Address:

3715 WINDERWOOD DR.
SARASOTA, FL 34232

New Mailing Address:

7308 MAUNA LOA BLVD
SARASOTA, FL 34241

FEI Number: 90-0080426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYMAN, ANDREW
3715 WINDERWOOD DR.
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

LYMAN, ANDREW
7308 MAUNA LOA BLVD
SARASOTA, FL 34241 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: ANDREW LYMAN

03/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANDREW, LYMAN
Address: 3715 WINDERWOOD DR.
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ANDREW, LYMAN
Address: 7308 MAUNA LOA BLVD
City-St-Zip: SARASOTA, FL 34241

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: ANDREW LYMAN

P

03/20/2005

Electronic Signature of Signing Officer or Director

Date