## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000065736

Entity Name: ALL POLY, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3795 ALT HWY 19 NORTH 13604 COUNTY LINE ROAD UNIT C FOUNTAIN, FL 32438

PALM HARBOR, FL 34683

Current Mailing Address: New Mailing Address:

3795 ALT HWY 19 NORTH
UNIT C
PALM HARBOR, FL 34683

13604 COUNTY LINE ROAD
FOUNTAIN, FL 32438

FEI Number: 61-1451590 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HOOVER, ROGER A 3795 ALT HWY 19 NORTH UNIT C PALM HARBOR, FL 34683 US HOOVER, ROGER A 13604 COUNTY LINE ROAD FOUNTAIN, FL 32438 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Name:

MR. ( ) Delete Title: MR. (X) Change ( ) Addition HOOVER, ROGER A CEO
Name: HOOVER, ROGER A CEO
S: 3795 ALT HWY 19 NORTH, UNIT C Address: 13604 COUNTY LINE ROAD

Address: 3795 ALT HWY 19 NORTH, UNIT C Address: 13604 COUNTY LINE RC City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: FOUNTAIN, FL 32438

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

 Name:
 Name:
 HOOVER, CHRISTINE M

 Address:
 Address:
 13604 COUNTY LINE ROAD

 City-St-Zip:
 City-St-Zip:
 FOUNTAIN, FL 32438

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: ROGER A. HOOVER CEO 04/29/2005