2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086750

Entity Name: GENESYS POWER SOLUTIONS, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
16110 CHIPCO RANCH RD DADE CITY, FL 33523	33252 CHIPCO RANCH RD DADE CITY, FL 33523

Current Mailing Address:	**New Mailing Address:**
PO BOX 2068 DADE CITY, FL 33526 US	

FEI Number: 68-0563404   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:**
COKER, SHERRY A 16110 CHIPCO RANCH RD DADE CITY, FL 33523 US	COKER, SHERRY A 33252 CHIPCO RANCH RD DADE CITY, FL 33523 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: SHERRY A. COKER   04/15/2006

            Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PRES ( ) Delete
Name:	COKER, SHERRY A
Address:	16110 CHIPCO RANCH RD
City-St-Zip:	DADE CITY, FL 33523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PRES (X) Change ( ) Addition
Name:	COKER, SHERRY A
Address:	33252 CHIPCO RANCH RD
City-St-Zip:	DADE CITY, FL 33523

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SHERRY A. COKER   PRES   04/15/2006

            Electronic Signature of Signing Officer or Director   Date