

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109529

Entity Name: FINANCIAL BALANCING, INC.

FILED
Jan 14, 2005
Secretary of State

Current Principal Place of Business:

401 E. SLIGH AVE
TAMPA, FL 33604

New Principal Place of Business:

3514 W ARCH STREET
TAMPA, FL 33607

Current Mailing Address:

401 E. SLIGH AVE
TAMPA, FL 33604

New Mailing Address:

3514 W ARCH STREET
TAMPA, FL 33607

FEI Number: 20-0244686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WETHERINGTON, WADE
400 N. TAMPA ST.
2625
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

LINS, D. MICHAEL ESQUIRE
711 W FLETCHER AVE
SUITE B
TAMPA, FL 33612 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: D. MICHAEL LINS. ESQUIRE

01/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CLARK, RON
Address: 401 E. SLIGH AVE
City-St-Zip: TAMPA, FL 33604

Title: D () Delete
Name: HART, CARL
Address: 401 E. SLIGH AVE
City-St-Zip: TAMPA, FL 33604

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change () Addition
Name: CLARK, RONALD D
Address: 3514 W ARCH STREET
City-St-Zip: TAMPA, FL 33607

Title: D,S (X) Change () Addition
Name: HART, RUSSELL W
Address: 3514 W ARCH STREET
City-St-Zip: TAMPA, FL 33607

Title: D,T () Change (X) Addition
Name: PERDUE, SHARON L
Address: 3514 W ARCH STREET
City-St-Zip: TAMPA, FL 33607

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: SHARON L PERDUE

TREA

01/14/2005

Electronic Signature of Signing Officer or Director

Date