

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000120319

Entity Name: JOHN TREXLER, INC.

FILED  
Apr 30, 2005  
Secretary of State

## Current Principal Place of Business:

5020 OLD CHENEY HIGHWAY  
ORLANDO, FL 32807

## New Principal Place of Business:

P.O. BOX 2273  
GOLDENROD, FL 32733

## Current Mailing Address:

5020 OLD CHENEY HIGHWAY  
ORLANDO, FL 32807

## New Mailing Address:

P.O. BOX 2273  
GOLDENROD, FL 32733

FEI Number: 20-0341034

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TREXLER, JOHN F  
5020 OLD CHENEY HIGHWAY  
ORLANDO, FL 32807 US

## Name and Address of New Registered Agent:

TREXLER, JOHN F  
P.O. BOX 2273  
GOLDENROD, FL 32733 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:

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPV ( ) Delete  
Name: TREXLER, JOHN F  
Address: 5020 OLD CHENEY HIGHWAY  
City-St-Zip: ORLANDO, FL 32807

Title: ST ( ) Delete  
Name: TREXLER, JOHN F  
Address: 5020 OLD CHENEY HIGHWAY  
City-St-Zip: ORLANDO, FL 32807

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPV (X) Change ( ) Addition  
Name: TREXLER, JOHN F  
Address: P.O. BOX 2273  
City-St-Zip: GOLDENROD, FL 32733

Title: ST (X) Change ( ) Addition  
Name: TREXLER, JOHN F  
Address: P.O. BOX 2273  
City-St-Zip: GOLDENROD, FL 32733

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: JOHN TREXLER

DPV

04/30/2005

Electronic Signature of Signing Officer or Director

Date