## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000127522

Entity Name: PVB CONSULTING, INC.

FILED Jan 13, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 18510 S.E. LAKESIDE DRIVE TEQUESTA, FL 33469 **Current Mailing Address: New Mailing Address:** 18510 S.E. LAKESIDE DRIVE TEQUESTA, FL 33469 FEI Number: 26-0074571 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: LEGALZOOM NEVADA INC 44 W. FLAGLER ST. SUITE 675 MIAMI, FL 33130 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS ( ) Delete () Change () Addition BODNAR, PAUL V JR. Name: Name: 18510 S.E. LAKESIDE DRIVE Address: Address: TEQUESTA, FL 33469 US City-St-Zip: City-St-Zip: ( ) Delete Title: Title: TREA () Change () Addition Name: EVANS, BARBA LEE Name: 18510 S.E. LAKESIDE DRIVE Address: Address: TEQUESTA, FL 33469 US City-St-Zip: City-St-Zip: Title: Title: SECR () Delete () Change () Addition ORRIS, MARIE E Name: Name: 18510 S.E. LAKESIDE DRIVE Address: Address: City-St-Zip: TEQUESTA, FL 33469 US City-St-Zip: Title: () Delete Title: **VPRE** ( ) Change (X) Addition SOTTILE, JAMES Name: Name: Address: Address: 83 PINEDALE STREET City-St-Zip: City-St-Zip: SOUITHBRIDGE, MA 01550 US Title: Title: ( ) Change (X) Addition ( ) Delete Name: Name: GAVALLA, GEORGE A Address: Address: 11 CHERRY HILL ROAD City-St-Zip: City-St-Zip: NORWICH, CT 06360 US

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: PAUL V BODNAR JR PRES 01/13/2005