

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000143464

FILED
Apr 20, 2005
Secretary of State

Entity Name: BRUCE D LADD CO.

Current Principal Place of Business:

1133 BAL HARBOR BLVD.
SUITE #1139-303
PUNTA GORDA, FL 33950 US

New Principal Place of Business:

Current Mailing Address:

1133 BAL HARBOR BLVD.
SUITE #1139-303
PUNTA GORDA, FL 33950 US

New Mailing Address:

FEI Number: 20-0457443 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LADD, BRUCE
1133 BAL HARBOR BLVD.
SUITE #1139-303
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

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:

Title: DPS () Delete
Name: LADD, BRUCE D
Address: 1133 BAL HARBOR BLVD.SUITE #1139-303
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: VPT () Delete
Name: LADD, BRUCE D
Address: 1133 BAL HARBOR BLVD.SUITE #1139-303
City-St-Zip: PUNTA GORDA, FL 33950 US

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPT (X) Change () Addition
Name: BURCH, LORI Y
Address: 1133 BAL HARBOR BLVD.SUITE #1139-303
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: SEC () Change (X) Addition
Name: BURCH, LORI Y
Address: 1133 BAL HARBOR BLVD STE#1139-303
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: TRES () Change (X) Addition
Name: LADD, BRUCE D
Address: 1133 BAL HARBOR BLVD. STE 1139-303
City-St-Zip: PUNTA GORDA, FL 33950

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: BRUCE D. LADD

DPS

04/20/2005

Electronic Signature of Signing Officer or Director

_____ Date