

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000010246

Entity Name: NOVI LONGLINER INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

5865 COUNTRY ROAD208
LOT B
ST. AUGUSTINE, FL 32092

New Principal Place of Business:

3125B PACETTI RD
ST. AUGUSTINE, FL 32092

Current Mailing Address:

5865 COUNTRY ROAD208
LOT B
ST. AUGUSTINE, FL 32092

New Mailing Address:

3125B PACETTI RD
ST. AUGUSTINE, FL 32092

FEI Number: 20-0581992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLEE, FAREN
5865 COUNTRY ROAD 208
LOT B
ST. AUGUSTINE, FL 32092 US

Name and Address of New Registered Agent:

HEINRICH, JOHN B JR.
5865 COUNTRY ROAD 208
LOT B
ST. AUGUSTINE, FL 32092 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: JOHN B HEINRICH

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SACKS, LARRY
Address: 3300 PACETTI ROAD
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: P () Delete
Name: COLEE, FAREN
Address: 5865 COUNTRY ROAD 208 LOT B
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: T () Delete
Name: COLEE, FAREN
Address: 5865 COUNTRY ROAD 208 LOT B
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: S () Delete
Name: SACKS, LARRY
Address: 3300 PACETTI ROAD
City-St-Zip: ST. AUGUSTINE, FL 32092

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: SACKS, LARRY
Address: # 4216
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: T (X) Change () Addition
Name: RAWSON, WILLIAM J
Address: 1107 KEY PLAZA APT 103
City-St-Zip: KEY WEST, FL 33040

Title: S (X) Change () Addition
Name: HEINRICH, JOHN B JR.
Address: 3125B PACETTI ROAD
City-St-Zip: ST. AUGUSTINE, FL 32092

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: LARRY SACKS

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date