

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000019718

Entity Name: STAN HARRIS, C.E.M., INC.

FILED
May 11, 2005
Secretary of State

Current Principal Place of Business:

5702 MONTE ROSSO ROAD
SARASOTA, FL 34243 US

New Principal Place of Business:

Current Mailing Address:

5702 MONTE ROSSO ROAD
SARASOTA, FL 34243 US

New Mailing Address:

FEI Number: 20-0668531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, TAMI
4350 LAROSA AVENUE
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

HARRIS, STANLEY
5702 MONTE ROSSO ROAD
SARASOTA, FL 34243 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: STANLEY A. HARRIS

05/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HARRIS, STAN
Address: 5702 MONTE ROSSO ROAD
City-St-Zip: SARASOTA, FL 34243 US

Title: D,VP () Delete
Name: HARRIS, LINDA
Address: 5702 MONTE ROSSO ROAD
City-St-Zip: SARASOTA, FL 34243 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: STANLEY A. HARRIS

DP

05/11/2005

Electronic Signature of Signing Officer or Director

Date