

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000022019

FILED
Jan 26, 2005
Secretary of State

Entity Name: AZTECH ASSISTIVE TECHNOLOGY CENTER INC.

Current Principal Place of Business:

5798 ST AUGUSTINE RD
JACKSONVILLE, FL 32207

New Principal Place of Business:

7030 ST AUGUSTINE RD
JACKSONVILLE, FL 32217

Current Mailing Address:

5798 ST AUGUSTINE RD
JACKSONVILLE, FL 32207

New Mailing Address:

7030 ST AUGUSTINE RD
JACKSONVILLE, FL 32217

FEI Number: 20-0513304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAYNE ALSUP, MICHAEL
5798 ST AUGUSTINE RD
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

WAYNE ALSUP, MICHAEL
7030 ST AUGUSTINE RD
JACKSONVILLE, FL 32217 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: MICHAEL W. ALSUP

01/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: ROBERTS, BRUCE
Address: 5798 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL 32207

Title: COO () Delete
Name: WAYNE ALSUP, MICHAEL
Address: 5798 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: ROBERTS, BRUCE
Address: 7030 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL 32217

Title: COO (X) Change () Addition
Name: WAYNE ALSUP, MICHAEL
Address: 7030 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL 32217

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: MICHAEL W. ALSUP

COO

01/26/2005

Electronic Signature of Signing Officer or Director

Date