

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90123 041 ***150.00

DOCUMENT # P04000027477 1. Entity Name C. WOLF TECHNOLOGIES, INC.																													
Principal Place of Business 946 CEDAR RIDGE COURT ORANGE PARK, FL 32065			Mailing Address 946 CEDAR RIDGE COURT ORANGE PARK, FL 32065																										
2. Principal Place of Business 7938 Longshadow Ct		3. Mailing Address 7938 Longshadow Ct																											
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		01292005 Chg-P CR2E034 (10/03)																									
City & State Jacksonville, FL		City & State JACKSONVILLE, FL		4. FEI Number 20-0716737																									
Zip 32244		Zip 32244		Country US																									
Country US		Country US		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent WOLF, CHRISTOPHER 946 CEDAR RIDGE COURT ORANGE PARK, FL 32065				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 7938 Longshadow Ct City JACKSONVILLE FL Zip Code 32244																									
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u><i>Christopher C. Wolf</i></u> DATE: <u>1-29-05</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rechartering.)																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">P</td> <td style="width: 20%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>WOLF, CHRISTOPHER</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>946 CEDAR RIDGE COURT</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>ORANGE PARK, FL 32065</td> <td></td> </tr> </table>			TITLE	P	☐ Delete	NAME	WOLF, CHRISTOPHER		STREET ADDRESS	946 CEDAR RIDGE COURT		CITY-ST-ZIP	ORANGE PARK, FL 32065		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">VP</td> <td style="width: 20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>PARKS, JEREMY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>8772 FIELD SIDE DR S</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>JACKSONVILLE, FL 32244</td> <td></td> </tr> </table>			TITLE	VP	☐ Change ☐ Addition	NAME	PARKS, JEREMY		STREET ADDRESS	8772 FIELD SIDE DR S		CITY-ST-ZIP	JACKSONVILLE, FL 32244	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																													
SIGNATURE: <u><i>Christopher C. Wolf</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				DATE: <u>1-29-05</u> Date																									