

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000053197

FILED
Mar 08, 2005
Secretary of State

Entity Name: OLD DOMINION MANAGEMENT & CONSULTANTS, INC.

Current Principal Place of Business:

9269 SW 193RD CIRCLE
DUNNELLO, FL 34432

New Principal Place of Business:

20861 SW 81ST LOOP
DUNNELLO, FL 34431

Current Mailing Address:

9269 SW 193RD CIRCLE
DUNNELLO, FL 34432

New Mailing Address:

20861 SW 81ST LOOP
DUNNELLO, FL 34431

FEI Number: 03-0393754

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LETCHWORTH, ELIZABETH B
9269 SW 193RD CIRCLE
DUNNELLO, FL 34432 US

Name and Address of New Registered Agent:

LETCHWORTH, ELIZABETH B
20861 SW 81ST LOOP
DUNNELLO, FL 34431 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:

03/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LETCHWORTH, ELIZABETH B
Address: 9269 SW 193RD CIRCLE
City-St-Zip: DUNNELLO, FL 34432

Title: VP () Delete
Name: LETCHWORTH, RON H
Address: 9269 SW 193RD CIRCLE
City-St-Zip: DUNNELLO, FL 34432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LETCHWORTH, ELIZABETH B
Address: 20861 SW 81ST LOOP
City-St-Zip: DUNNELLO, FL 34431

Title: VP (X) Change () Addition
Name: LETCHWORTH, RON H
Address: 20861 SW 81ST LOOP
City-St-Zip: DUNNELLO, FL 34431

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: ELIZABETH B. LETCHWORTH

P

03/08/2005

Electronic Signature of Signing Officer or Director

Date