

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000053946

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: FFT TRANSPORTATION CORP.

## Current Principal Place of Business:

518 NORTH RIVERPOINT DRIVE  
STUART, FL 34994 US

## New Principal Place of Business:

## Current Mailing Address:

C/O PASSARIELLO & STAIANO CPA PA  
6466 NW 5TH WAY  
FT. LAUDERDALE, FL 33309 US

## New Mailing Address:

ONE NORTH CLEMATIS STREET  
SUITE 500  
WEST PALM BEACH, FL 33401 US

FEI Number: 20-0949666

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATRICIA LEBOW, P.A.  
ONE NORTH CLEMATIS STREET  
SUITE 500  
WEST PALM BEACH, FL 33401 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: OSBORNE, BARBARA J  
Address: 3305 SW RIVERS END WAY  
City-St-Zip: PALM CITY, FL 34990 US

Title: VPSD ( ) Delete  
Name: LEVIN, EILEEN G  
Address: 518 NORTH RIVERPOINT DRIVE  
City-St-Zip: STUART, FL 34994 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: EILEEN LEVIN

VP

04/27/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date