

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Feb 15, 2005  
Secretary of State**

DOCUMENT# P04000090686

Entity Name: AXIS GROUP SOUTHEAST, INC.

**Current Principal Place of Business:**

2623 MCCORMICK DRIVE  
SUITE 104  
CLEARWATER, FL 33759

**New Principal Place of Business:**

**Current Mailing Address:**

2623 MCCORMICK DRIVE  
SUITE 104  
CLEARWATER, FL 33759

**New Mailing Address:**

FEI Number: 20-1232725      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EDWARDS, THOMAS J  
2623 MCCORMICK DRIVE  
SUITE 104  
CLEARWATER, FL 33759 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

**OFFICERS AND DIRECTORS:**

Title: OFF ( ) Delete  
Name: EDWARDS, THOMAS J  
Address: 418 SILVER MOSS LANE  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: OFF ( ) Delete  
Name: LEACH, JEFFREY M  
Address: 960 SW 19TH STREET  
City-St-Zip: BOCA RATON, FL 33486

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: EDWARDS, THOMAS J  
Address: 418 SILVER MOSS LANE  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: VP (X) Change ( ) Addition  
Name: PUGHE, THOMAS J  
Address: 3941 NE 31ST AVENUE  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: SEC ( ) Change (X) Addition  
Name: EDWARDS, SHAWNA L  
Address: 418 SILVER MOSS LANE  
City-St-Zip: TARPON SPRINGS, FL 34688

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: SHAWNA L EDWARDS

SEC

02/15/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date