

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Sep 19, 2005
Secretary of State**

DOCUMENT# P04000096738

Entity Name: EXTREME CUSTOM BILLIARDS, INC.

Current Principal Place of Business:

37008 FORESTDEL DRIVE
EUSTIS, FL 32736

New Principal Place of Business:

Current Mailing Address:

37008 FORESTDEL DRIVE
EUSTIS, FL 32736

New Mailing Address:

FEI Number: 20-1289407 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONOD, JOHN W
37008 FORESTDEL DRIVE
EUSTIS, FL 32736 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: P () Delete
Name: CONOD, JOHN W
Address: 37008 FORESTDEL DRIVE
City-St-Zip: EUSTIS, FL 32736

Title: VPST () Delete
Name: CONOD, MARY R
Address: 37008 FORESTDEL DRIVE
City-St-Zip: EUSTIS, FL 32736

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: CONOD, MARY R
Address: 37008 FORESTDEL DRIVE
City-St-Zip: EUSTIS, FL 32736

Title: ST () Change (X) Addition
Name: OSWALT, PATRICIA L
Address: 85 SPUR ROAD
City-St-Zip: DEBARY, FL 32713 US

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: JOHN W. CONOD

P

09/19/2005

Electronic Signature of Signing Officer or Director

_____ Date