

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000098138

FILED
May 02, 2005
Secretary of State

Entity Name: BUCKLER ENTERPRISES, INC.

Current Principal Place of Business:

10240 ESTWAY DR
TAMPA, FL 33647

New Principal Place of Business:

1462 HICKORY BRANCH TRAIL
KENNESAW, GA 30188

Current Mailing Address:

10240 ESTWAY DR
TAMPA, FL 33647

New Mailing Address:

1462 HICKORY BRANCH TRAIL
KENNESAW, GA 30188

FEI Number: 20-1336496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUCKLER, JULIE
10240 ESTWAY DR
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

BUCKLER, JULIE
1462 HICKORY BRANCH TRAIL
KENNESAW, FL 30188 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: _____

05/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BUCKLER, JULIE
Address: 10240 ESTWAY DR
City-St-Zip: TAMPA, FL 33647

Title: CEO () Delete
Name: BUCKLER, ALAN
Address: 10240 ESTWAY DR
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BUCKLER, JULIE
Address: 1462 HICKORY BRANCH TRAIL
City-St-Zip: KENNESAW, GA 30188

Title: CEO (X) Change () Addition
Name: BUCKLER, ALAN
Address: 1462 HICKORY BRANCH TRAIL
City-St-Zip: KENNESAW, GA 30188

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: JULIE A BUCKLER

P

05/02/2005

Electronic Signature of Signing Officer or Director

Date