

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000104204

Entity Name: GOODWIN & GOODWIN, INC.

FILED
Jan 15, 2005
Secretary of State

Current Principal Place of Business:

953 OLD DIXIE HIGHWAY
VERO BEACH, FL 32962 US

New Principal Place of Business:

5015 PALMETTO DRIVE
FORT PIERCE, FL 34982 US

Current Mailing Address:

953 OLD DIXIE HIGHWAY
VERO BEACH, FL 32962 US

New Mailing Address:

5015 PALMETTO DRIVE
FORT PIERCE, FL 34982 US

FEI Number: 20-2144020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSEN, ERIK C
243 W. PARK AVENUE
SUITE 201
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

GOODWIN, EDWIN
5015 PALMETTO DRIVE
FORT PIERCE, FL 34982 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: EDWIN GOODWIN

01/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GOODWIN, EDWIN
Address: ADMIRAL'S GORSE, DINGLE LANE
City-St-Zip: BRIDGEMERE, CHESHIRE, UK CW5 7PZ UK

Title: VPD () Delete
Name: GOODWIN, RACHAEL E
Address: ADMIRAL'S GORSE, DINGLE LANE
City-St-Zip: BRIDGEMERE, CHESHIRE, UK CW5 7PZ UK

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GOODWIN, EDWIN
Address: 5015 PALMETTO DRIVE
City-St-Zip: FORT PIERCE, FL 34982 US

Title: VPD (X) Change () Addition
Name: GOODWIN, RACHAEL E
Address: 5015 PALMETTO DRIVE
City-St-Zip: FORT PIERCE, FL 34982 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: EDWIN GOODWIN

PRES

01/15/2005

Electronic Signature of Signing Officer or Director

Date