

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000109867

Entity Name: AMB PROCESSING, CORP.

FILED  
Apr 23, 2005  
Secretary of State

## Current Principal Place of Business:

2823 WYCOMBE WAY  
PALM HARBOR, FL 34685

## New Principal Place of Business:

2451 MCMULLEN BOOTH RD  
221  
CLEARWATER, FL 33659

## Current Mailing Address:

2823 WYCOMBE WAY  
PALM HARBOR, FL 34685

## New Mailing Address:

2451 MCMULLEN BOOTH RD  
221  
CLEARWATER, FL 33659

FEI Number: 20-1410809

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KENDALL, ANETTE  
ONE BEACH DR SE  
303  
ST. PETERSBURG, FL 33701 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: P,VP ( ) Delete  
Name: BURRIDGE, APRIL M  
Address: 2823 WYCOMBE WAY  
City-St-Zip: PALM HARBOR, FL 34685

Title: T,S ( ) Delete  
Name: BURRIDGE, APRIL M  
Address: 2823 WYCOMBE WAY  
City-St-Zip: PALM HARBOR, FL 34685

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,VP (X) Change ( ) Addition  
Name: KING, APRIL M  
Address: 2451 MCMULLEN BOOTH RD # 221  
City-St-Zip: CLEARWATER, FL 33659

Title: T,S (X) Change ( ) Addition  
Name: KING, APRIL M  
Address: 2451 MCMULLEN BOOTH RD # 221  
City-St-Zip: CLEARWATER, FL 33659

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: APRIL KING

P

04/23/2005

Electronic Signature of Signing Officer or Director

Date