2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000122090

FILED Apr 15, 2005 Secretary of State

Entity Name: SWEEPER MAN OF WEST CENTRAL FLORIDA, INC.						
Current Principal Place of Business:				New Principal Place of Business:		
2519 MCMULLEN BOOTH ROAD SUITE 510-115 CLEARWATER, FL 33761						
Current Mailing Address:				New Mailing Address:		
2519 MCMULLEN BOOTH ROAD SUITE 510-115 CLEARWATER, FL 33761						
FEI Number:	20-1548640	FEI Number Applied For ()	FEI Num	ber Not Appl	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
DAVIS, BRAD M 2519 MCMULLEN BOOTH ROAD SUITE 510-115 CLEARWATER, FL 33761 US				MAYERS, MATTHEW E 3131 HILLSIDE LANE SAFETY HARBOR, FL 34695 US		
The above in the State		ubmits this statement for the p	ourpose of	changing it	its registered office or registered agent, or both,	
SIGNATURE: MATTHEW MAYERS				04/15/2005		
	Electroni	c Signature of Registered Age	∋nt		Date	
Election Carr	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DAVIS, BRAD M	N BOOTH ROAD, SUITE 510-115		Title: Name: Address: City-St-Zip:	PRES (X) Change () Addition MAYERS, MATTHEW E 3131 HILLSIDE LANE SAFETY HARBOR, FL 34695	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	V. P () Change (X) Addition MAYERS, AMY S 3131 HILLSIDE LANE SAFETY HARBOR, FL 34695	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	SEC () Change (X) Addition MAYERS, AMY S 3131 HILLSIDE LANE SAFETY HARBOR. FL 34695	

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: AMY S. MAYERS VP 04/15/2005