

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000140348

FILED  
Apr 14, 2005  
Secretary of State

Entity Name: MASS INVESTORS CORPORATION

## Current Principal Place of Business:

27289 HIGH SEAS LANE  
BONITA SPRINGS, FL 34135

## New Principal Place of Business:

8847 TAMiami TRAIL N  
NAPLES, FL 34109

## Current Mailing Address:

27289 HIGH SEAS LANE  
BONITA SPRINGS, FL 34135

## New Mailing Address:

FEI Number: 20-1778143      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MENDES, TIMMY  
1118 SWEETWATER LN UNIT 1305  
NAPLES, FL 34110 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 ( ) Delete  
Name: MENDES, TIMMY  
Address: 1118 SWEETWATER LN  
City-St-Zip: NAPLES, FL 34110

Title: V ( ) Delete  
Name: BALL, MATTHEW  
Address: 141 CHANTER WOOD  
City-St-Zip: LEE, MA 01238

Title: T ( ) Delete  
Name: LANGLOIS, MATTHEW  
Address: 27289 HIGH SEAS LANE  
City-St-Zip: BONITA SPRINGS, FL 34135

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition  
Name: BALL, GEORGE  
Address: 141 CHANTER WOOD  
City-St-Zip: LEE, MA 01238

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

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: TIMMY MENDES

P

04/14/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date