

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2005 8:00 am
Secretary of State

02-11-2005 90055 037 ***150.00

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DOCUMENT # P04000143282 1. Entity Name SILENCED GENERATORS, INC																																	
Principal Place of Business 9700 MERLE DRIVE FT MYERS, FL 33917 US			Mailing Address 9700 MERLE DRIVE FT MYERS, FL 33917 US																														
2. Principal Place of Business 7771 GLADIOLIS DR Suite, Apt. #, etc. #17 City & State FT. Myers FL Zip 33908 Country US		3. Mailing Address 7771 GLADIOLIS DR Suite, Apt. #, etc. #17 City & State FT. Myers FL Zip 33908 Country US		02022005 Chg-P CR2E034 (10/03)																													
4. FEI Number 20-1759248				Applied For Not Applicable																													
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																	
6. Name and Address of Current Registered Agent ANNAZONE, ANTHONY 9700 MERLE DRIVE FT MYERS, FL 33917			7. Name and Address of New Registered Agent Name NICOLA ZUCALA Street Address (P.O. Box Number is Not Acceptable) 7771 GLADIOLIS DR #17 City FT. Myers FL Zip Code 33908																														
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																															
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 35%;">NAME</td> <td style="width: 10%; text-align: center;">Delete</td> </tr> <tr> <td></td> <td>ANNAZONE, ANTHONY</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">9700 MERLE DR</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">FT MYERS, FL 33917</td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 35%;">NAME</td> <td style="width: 10%; text-align: center;">Change</td> <td style="width: 10%; text-align: center;">Addition</td> </tr> <tr> <td></td> <td>NICOLA ZUCALA</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="3">7771 GLADIOLIS DR #17</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="3">FT. Myers FL 33908</td> </tr> </table> </div> </div>						TITLE	NAME	Delete		ANNAZONE, ANTHONY	<input checked="" type="checkbox"/>	STREET ADDRESS	9700 MERLE DR		CITY-ST-ZIP	FT MYERS, FL 33917		TITLE	NAME	Change	Addition		NICOLA ZUCALA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	STREET ADDRESS	7771 GLADIOLIS DR #17			CITY-ST-ZIP	FT. Myers FL 33908		
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																	
SIGNATURE: 2-2-05 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																	