

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000144752

FILED
May 02, 2005
Secretary of State

Entity Name: NAMKROW ENTERPRISES, INC.

Current Principal Place of Business:

2273 HONEYCOMB LN
LAKELAND, FL 33801

New Principal Place of Business:

6831 KRENSON OAKS CIRCLE
LAKELAND, FL 33810

Current Mailing Address:

2273 HONEYCOMB LN
LAKELAND, FL 33801

New Mailing Address:

6831 KRENSON OAKS CIRCLE
LAKELAND, FL 33810

FEI Number: 59-3786527

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, KRISTINA A
3243-A BLUE HERON DR
KISSIMMEE, FL 34741 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WORKMAN, RUSSEL L
Address: 2273 HONEYCOMB LN
City-St-Zip: LAKELAND, FL 33801

Title: VP () Delete
Name: WORKMAN, SAMANTHA A
Address: 2273 HONEYCOMB LN
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WORKMAN, RUSSEL L
Address: 6831 KRENSON OAKS CIRCLE
City-St-Zip: LAKELAND, FL 33810

Title: VP (X) Change () Addition
Name: WORKMAN, SAMANTHA A
Address: 6831 KRENSON OAKS CIRCLE
City-St-Zip: LAKELAND, FL 33810

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: RUSSEL L WORKMAN

P

05/02/2005

Electronic Signature of Signing Officer or Director

_____ Date