2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000144920

Entity Name: JON BINNING CORPORATION

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
5718 THRUSH DRIVE NEW PORT RICHEY, FL 34652 US	PO BOX 1587 ELFERS, FL 34680 US
Current Mailing Address:	New Mailing Address:
5718 THRUSH DRIVE NEW PORT RICHEY, FL 34652 US	5408 ST JAMES DRIVE NEW PORT RICHEY, FL 34652 US
FEI Number: 65-1235129 FEI Number Applied For () FEI Number	mber Not Applicable () Certificate of Status Desired (X)
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
BINNING, JON 5718 THRUSH DRIVE NEW PORT RICHEY, FL 34652 US	DREW, KELLY 5408 ST JAMES DRIVE NEW PORT RICHEY, FL 34652 US
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: KELLY DREW	04/28/2005
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	

Title:

Name:

OFFICERS AND DIRECTORS:

BINNING, JON

() Delete

Title:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

BINNING, JON

(X) Change () Addition

5718 THRUSH DRIVE Address: PO BOX 1587 Address: City-St-Zip: NEW PORT RICHEY, FL 34652 City-St-Zip: ELFERS, FL 34680 US Title: () Delete Title: () Change (X) Addition BINNING, JON Name: Name: Address: Address: PO BOX 1587 ELFERS, FL 34680 US City-St-Zip: City-St-Zip: Title: Title: () Change (X) Addition () Delete Name: Name: BINNING, JON Address: PO BOX 1587 Address City-St-Zip: City-St-Zip: ELFERS, FL 34680 US Title: () Delete Title: () Change (X) Addition BINNING, JON Name: Name: Address: Address: PO BOX 1587 City-St-Zip: City-St-Zip: ELFERS, FL 34680 US

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: JON BINNING **PRES** 04/28/2005