## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000152311

FILED Apr 23, 2005 Secretary of State

Entity Na	me: TOTAL C	YCLE PERFORMANCE, INC.				
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
	RPORT BLVD DLA, FL 32505			179 W. AIRPORT BLVD PENSACOLA, FL 32505		
Current N	lailing Addres	ss:	New Maili	New Mailing Address:		
P.O. BOX 457 GONZALEZ, FL 32560				179 W AIRPORT BLVD PENSACOLA, FL 32505		
FEI Number	El Number: 20-1845093 FEI Number Applied For ( ) FE		FEI Number Not App	licable()	Certificate of Status Desired	() t
Name and	l Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
783 ARCH CANTONN The above	MENT, FL 325		ourpose of changing	its registered	l office or registered agent, त	or both,
SIGNATU						
		ic Signature of Registered Ag	ent	Date		
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name:	BRECKENRIDO 783 ARCHER F CANTONMENT	RD FL 32533 Delete	Title: Name: Address: City-St-Zip: Title: Name:	BRECKENRI 783 ARCHEF CANTONMEN	(X) Change ( ) Addition DGE, GEORGE C R RD NT, FL 32533 ( ) Change ( ) Addition	
Address:	783 ARCHER F	RD.	Address:			

( ) Delete Title: Name: HOLSTMAN, WESLEY D Address: 4398 PARADISE BAY DRIVE GULF BREEZE, FL 32563

CANTONMENT, FL 32533

City-St-Zip:

City-St-Zip:

Title: (X) Change ( ) Addition HOLSTMAN, WESLEY D

Name: Address: 4398 PARADISE BAY DRIVE City-St-Zip: GULF BREEZE, FL 32563

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: GEORGE C. BRECKENRIDGE VΡ 04/23/2005