

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000152983

Entity Name: ONADARE SERVICES, INC.

FILED
May 27, 2005
Secretary of State

Current Principal Place of Business:

45376 GREEN AVENUE
CALLAHAN, FL 32011

New Principal Place of Business:

43189 SCOTT LANE
CALLAHAN, FL 32011

Current Mailing Address:

P.O. BOX 1661
CALLAHAN, FL 32011

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPENCER, WILLIAM I
45376 GREEN AVENUE
CALLAHAN, FL 32011 US

Name and Address of New Registered Agent:

SPENCER, WILLIAM I
43189 SCOTT LANE
CALLAHAN, FL 32011 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: WILLIAM I. SPENCER

05/27/2005

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: SPENCER, WILLIAM I
Address: 45376 GREEN AVENUE
City-St-Zip: CALLAHAN, FL 32011

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SPENCER, WILLIAM I
Address: 43189 SCOTT LANE
City-St-Zip: CALLAHAN, FL 32011

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: WILLIAM I. SPENCER

P

05/27/2005

Electronic Signature of Signing Officer or Director

Date