2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13619

Entity Name: INQUIP ASSOCIATES, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2100 ANACAPA ST.

SANTA BARBARA, CA 93105

Current Mailing Address: New Mailing Address:

PO BOX 2182 PO BOX 2182

SANTA BARBARA, CA 93120 SANRA BARBARA, CA 93120

FEI Number: 95-3103923 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

INCORP SERVICES, INC 103 NORTH MERIDÍAN ST US TALLAHASSEE, FL 32301

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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition HENSGEN, OSCAR E., Name: Name: HENSGEN, OSCAR E.,

2100 ANACAPA ST. 2100 ANACAPA ST. Address: Address: SANTA BARBARA, CA 93105 City-St-Zip: SANTA BARBARA, CA City-St-Zip:

Title: Title: () Delete (X) Change () Addition

HENSGEN, ELIZABETH J, . Name: HENSGEN, ELIZABETH J, . Name: 2100 ANACAPA ST. 2100 ANACAPA ST. Address: Address:

SANTA BARBARA, CA SANTA BARBARA, CA 93105 City-St-Zip: City-St-Zip: Title: Title:

(X) Change () Addition VD () Delete VD. NAMY, DOMINIQUE L NAMY, DOMINIQUE L Name: Name:

1001 GELSTON CRCL. 1001 GELSTON CIRCLE. Address: Address: City-St-Zip: MCLEAN, VA City-St-Zip: MCLEAN, VA 22102

Title: VD () Delete Title: VD (X) Change () Addition TILTGES, DANIEL J., TILTGES, DANIEL J., Name: Name: Address:

711 BURNINGTREE LANE Address: 711 W. BURNINGTREE LANE City-St-Zip: City-St-Zip: ARLINGTON HEIGHTS, IL ARLINGTON HEIGHTS, IL 60004

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.

Ρ SIGNATURE: OSCAR E. HENSGEN 04/29/2005