


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 21, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P93000041348		
1. Entity Name BRINTECH, INC.		
Principal Place of Business	Mailing Address	
124 CANAL STREET NEW SMYRNA BEACH, FL 32168 US	124 CANAL NEW SMYRNA BEACH, FL 32168 US	

**DO NOT WRITE IN THIS SPACE**

02082005 No Chg-P CR2E034 (10/03)

4. FEI Number 58-2056319	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
OSWALT, HAL W 124 CANAL ST. NEW SMYRNA BEACH, FL 32168

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOP OSWALT, HAL W 124 CANAL ST. NEW SMYRNA BEACH, FL 32168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CT SCHUETTE, REX S 124 CANAL ST. NEW SMYRNA BEACH, FL 32168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GILLILAND, THOMAS C 124 CANAL ST. NEW SMYRNA BEACH, FL 32168
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U00000237124  
02/21/05-80047-010 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Rex S. Schuette*  
Rex S. Schuette

2-14-05

Date

Daytime Phone #

386-427-6772