

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000046304

Entity Name: THE AUDIE GROUP, INC.

FILED
Feb 08, 2005
Secretary of State

Current Principal Place of Business:

1825 SOUTH DIVISION STREET
ORLANDO, FL 32805 US

New Principal Place of Business:

1825 SOUTH DIVISION AVENUE
ORLANDO, FL 328054729 US

Current Mailing Address:

6069 MASTERS BLVD
ORLANDO, FL 32819 US

New Mailing Address:

FEI Number: 59-3330453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AUDIE, MICHAEL F
1501 VENERA AVENUE
SUITE 300
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AUDIE, JAMES F
Address: 6069 MASTERS BLVD
City-St-Zip: ORLANDO, FL 32819 US

Title: D () Delete
Name: AUDIE, LORI A
Address: 6069 MASTERS BLVD
City-St-Zip: ORLANDO, FL 32819 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JAMES F AUDIE

DIR

02/08/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date