2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2005
Secretary of State

DOCUMENT# P95000047896

Entity Name: ASAP OFFICE BUILDINGS, INC.

Current Principal Place of Business:

16101 BELLAMY WAY
MONTVERDE, FL 34756 US

New Principal Place of Business:

Current Mailing Address:

16101 BELLAMY WAY
MONTVERDE, FL 34756 US

New Mailing Address:

FEI Number: 59-3321406 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BELLAMY, EDNA
16101 BELLAMY WAY
MONTVERDE, FL 34756 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: P ( ) Delete
Name: BELLAMY, EDNA
Address: 16101 BELLAMY WAY
City-St-Zip: MONTVERDE, FL 34756

Title: VP ( ) Delete
Name: BELLAMY, CHRISTOPHER K
Address: 16101 BELLAMY WAY
City-St-Zip: MONTVERDE, FL 34756

Title: SEC (X) Delete
Name: WIKINSON, CHARLES A
Address: 10602 LAKE RALPH DR
City-St-Zip: CLERMONT, FL 34711 US

Title: T ( ) Delete
Name: LARUE, JUSTIN T
Address: 17635 BROAD ST
City-St-Zip: MONTVERDE, FL 34756 US

Title: D (X) Delete
Name: TERESINSKI, ADAM
Address: 15840-27 COLONIAL DRIVE
City-St-Zip: CLERMONT, FL 34711

Title: D (X) Delete
Name: WIRSHIP, JOSHUA J
Address: 15840-27 COLONIAL DRIVE
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: BELLAMY, CHRISTOPHER K
Address: 16101 BELLAMY WAY
City-St-Zip: MONTVERDE, FL 34756

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

Title: D (X) Change ( ) Addition
Name: LARUE, JUSTIN T
Address: 17635 BROAD ST
City-St-Zip: MONTVERDE, FL 34756 US

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: EDNA BELLAMY P 03/01/2005

Electronic Signature of Signing Officer or Director Date