

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000052222

FILED
Apr 27, 2005
Secretary of State

Entity Name: BUSINESS TECHNOLOGY GROUP, INC.

Current Principal Place of Business:

7800 BELFORT PKWY
SUITE 290
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

10407 CENTURION PARKWAY N
SUITE 108
JACKSONVILLE, FL 32256 US

New Mailing Address:

P O BOX 24668
JACKSONVILLE, FL 32241 US

FEI Number: 59-3327860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEREDITH A. HERNANDEZ
P.O. BOX 24668
JACKSONVILLE, FL 32241 US

Name and Address of New Registered Agent:

HERNANDEZ, MEREDITH A
3617 CROWN POINT ROAD
SUITE # 2
JACKSONVILLE, FL 32257 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: MEREDITH ALLEN HERNANDEZ

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: POWERS, GAYLON K
Address: 7901 MOUNT RANIER DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: NELSON, TODD C
Address: 13784 ALESBURY COURT
City-St-Zip: JACKSONVILLE, FL 32224

Title: D () Delete
Name: FOLEY, BRET S
Address: 13068 CHELSEA HARBOR DRIVE
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: GAYLON POWERS

D

04/27/2005

Electronic Signature of Signing Officer or Director

Date