2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P96000045111

1. Entity Name

AIR RESEARCH DIFFUSER PRODUCTS, INC.



Principal Place of Business

2710 ALTERNATE 19 NORTH

SUITE 402

PALM HARBOR, FL 34683

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Mailing Address

2710 ALTERNATE 19 NORTH

SUITE 402

PALM HARBOR, FL 34683 U

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FILED Apr 11, 2005 08:00 AM Secretary of State



04072005

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3390749

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHUMACHER, DONALD J. 2710 ALTERNATE 19 NORTH SUITE 402 PALM HARBOR, FL 34683

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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 Signature, typed or printed name of registered agent and fille if applicable (NOTE Registered Agent signature required when reinstating) DATE					
	Signature, typed or primed riarde or registered agent and line t	rappicable [NOTE Registered Agen	i signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		 Flection Campaign Financing Trust Fund Contribution. 		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
NAME STREET ADDRESS CITY-ST-ZIP	PDST SCHUMACHER, DONALD J 2835 COBBLESTONE DRIVE PALM HARBOR, FL 34684				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					00000029/350 04/11/05-80022-009 150.00
TITLE NAME STREET ADDRESS GITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY ST-ZIP			IN THIS SPACE		
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12 I haraby cartly that the information supplied with this filling does not qualify for the exemption stated in Costian 110 07(9)(1) Clark to 14 the control of the cost of th					

12. I hereby certify that the information supplied with this filing does not qualify 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 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: M. M.

Donald J. Schumacher

4/8/05

Date

727-789-0748

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