

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000072089

Entity Name: CENTURY CONSULTING, INC.

FILED  
Apr 20, 2005  
Secretary of State

## Current Principal Place of Business:

120 BLODGETT  
CADILLAC, MI 49601

## New Principal Place of Business:

120 S. BLODGETT  
CADILLAC, MI 49601

## Current Mailing Address:

120 BLODGETT  
CADILLAC, MI 49601

## New Mailing Address:

120 S. BLODGETT  
CADILLAC, MI 49601

FEI Number: 59-3402255

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAXMAN, ROBERT J  
369 WHITCOMB DRIVE  
GENEVA, FL 32732 US

## Name and Address of New Registered Agent:

KOOLEY, KEVIN J  
100 N. SWEETWATER COVE BLVD.  
LONGWOOD, FL 32779 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: KEVIN J. KOOLEY

04/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MAXMAN, ROBERT J  
Address: 369 WHITCOMB DRIVE  
City-St-Zip: GENEVA, FL 32732

Title: D ( ) Delete  
Name: MAXMAN, BETSY A  
Address: 369 WHITCOMB DRIVE  
City-St-Zip: GENEVA, FL 32732

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MAXMAN, ROBERT J  
Address: 120 S. BLODGETT  
City-St-Zip: CADILLAC, MI 49601

Title: D (X) Change ( ) Addition  
Name: MAXMAN, BETSY A  
Address: 120 S. BLODGETT  
City-St-Zip: CADILLAC, MI 49601

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: ROBERT J. MAXMAN

D

04/20/2005

Electronic Signature of Signing Officer or Director

Date