

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000014297

FILED
Apr 26, 2005
Secretary of State

Entity Name: REFTEC INTERNATIONAL, INC.

Current Principal Place of Business:

1675 INDEPENDENCE BLVD
SARASOTA, FL 34234 US

New Principal Place of Business:

10530 PORTAL CROSSING WEST
101-104
BRADENTON, FL 34211 US

Current Mailing Address:

1675 INDEPENDENCE BLVD
SARASOTA, FL 34234 US

New Mailing Address:

10530 PORTAL CROSSING WEST
101-104
BRADENTON, FL 34211 US

FEI Number: 59-3439124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LECOMPTE, MORRIS A
800 SECOND AVE. SOUTH
SUITE 380
ST. PETERSBURG, FL 33701 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: PD () Delete
Name: SAGAR, CHRIS L
Address: 5388-115TH AVE N.
City-St-Zip: CLEARWATER, FL 34622

Title: D () Delete
Name: BUCKLES, WILLIAM G JR
Address: 455 INDIAN ROCKS RD
City-St-Zip: BELLEAIR BLUFFS, FL 34640

Title: D () Delete
Name: VELTMAN, DAVID M
Address: 455 INDIAN ROCKS RD
City-St-Zip: BELLEAIR BLUFFS, FL 34640

Title: D (X) Delete
Name: VELTMAN, GREG D
Address: 455 INDIAN ROCKS RD
City-St-Zip: BELLEAIR BLUFFS, FL 34640

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BUCKLES, WILLIAM G JR
Address: 4906A CREEKSIDE DRIVE
City-St-Zip: CLEARWATER, FL 33760

Title: D (X) Change () Addition
Name: LAWRENCE, CHRIS
Address: 4906A CREEKSIDE DRIVE
City-St-Zip: CLEARWATER, FL 33760

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: MORRIS A. LECOMPTE

RA

04/26/2005

Electronic Signature of Signing Officer or Director

_____ Date