


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 21, 2005 08:00 AM
Secretary of State**

DOCUMENT # P97000023973 1. Entity Name ENVIROPOWER CORPORATION	
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Principal Place of Business 100 LAKESHORE DRIVE 1254 NORTH PALM BEACH, FL 33403	Mailing Address PO BOX 613 PALM BEACH, FL 33480
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DO NOT WRITE IN THIS SPACE



04062005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0826569	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BARRETT, WILLIAM F 510 LAKESHORE DRIVE 12 LAKE PARK, FL 33403	DO NOT WRITE IN THIS SPACE
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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 *William F Barrett* **WILLIAM F. BARRETT** 4/17/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP QUIG, ROBERT 100 LAKESHORE DR. NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LUMSDEN, JOHN 11786 TIMBERS WAY BOCA RATON, FL 33428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BARRETT, WILLIAM 510 LAKESHORE DRIVE LAKE PARK, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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04/21/05-80025-003 150.00

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: *William F Barrett* **WILLIAM F. BARRETT** 4/17/05 561 848-9045
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #