# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 09, 2005**
**Secretary of State**

DOCUMENT# P97000083078

**Entity Name:** FLABS, INC.

**Current Principal Place of Business:**

423 POINSETTIA AVENUE
CLEARWATER, FL 33767 US

**New Principal Place of Business:**

**Current Mailing Address:**

423 POINSETTIA AVENUE
CLEARWATER, FL 33767 US

**New Mailing Address:**

**FEI Number: 59-3468854** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EDGER, LAWRENCE N
423 POINSETTIA AVENUE
CLEARWATER, FL 33767 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: DP ( ) Delete
Name: EDGER, LAWRENCE H
Address: 479 E SHORE DRIVE, APT 103
City-St-Zip: CLEARWATER, FL 33767

Title: DT ( ) Delete
Name: EDGER, L. ALLEN
Address: 200 STARCREST #41
City-St-Zip: CLEARWATER, FL 33765

Title: DS ( ) Delete
Name: EDGER, BRENT R
Address: 939 FALMOTH DRIVE
City-St-Zip: PALM HARBOR, FL 34684

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition
Name: EDGER, LAWRENCE H
Address: 423 POINSETTIA AVENUE
City-St-Zip: CLEARWATER, FL 33767

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

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

Title: VP ( ) Change (X) Addition
Name: EDGER, SONDRA K
Address: 423 POINSETTIA AVENUE
City-St-Zip: CLEARWATER, FL 33767

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: SONDRA K. EDGER VP 02/09/2005

Electronic Signature of Signing Officer or Director Date