

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000087658

FILED
Apr 08, 2005
Secretary of State

Entity Name: FOX AUTOMATED SYSTEMS TECHNOLOGIES, INC.

Current Principal Place of Business:

3411 CAPITAL MEDICAL BLVD
SUITE A
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

3411 CAPITAL MEDICAL BLVD
SUITE A
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-3502170

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOX, BENJAMIN J
415 E.BREVARD ST.
APT. 34
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

FOX, BENJAMIN J
8529 POLLY LANE.
TALLAHASSEE, FL 32309 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:

04/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: BENJAMIN J FOX,
Address: 415 E. BREVARD ST. APT. 34
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: BENJAMIN J FOX,
Address: 8529 POLLY LANE.
City-St-Zip: TALLAHASSEE, FL 32309

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: BENJAMIN J FOX

P

04/08/2005

Electronic Signature of Signing Officer or Director

Date