

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 22, 2005 8:00 am
Secretary of State

08-22-2005 90061 044 ***558.75

DOCUMENT # P98000015276

1. Entity Name
GLOBAL ENERGY & ENVIRONMENTAL RESEARCH, INC.



Principal Place of Business
2346 SUCCESS DRIVE
ODESSA, FL 33556

Mailing Address
2346 SUCCESS DRIVE
ODESSA, FL 33556

50062657



2. Principal Place of Business

11527 Pyramid Drive

Suite, Apt. #, etc.
Suite 102

City & State
Odessa, FL

Zip
33556

Country
USA

3. Mailing Address

5000 Legacy Drive

Suite, Apt. #, etc.
Suite 470

City & State
Plano, TX

Zip
75024

Country
USA

08092005 Chg-P CR2E034 (10/03)

4. FEI Number
59-3494459

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

TOOMEY, PETER
2346 SUCCESS DRIVE
ODESSA, FL 33556

7. Name and Address of New Registered Agent

Name **Tom Hebert**
 Street Address (P.O. Box Number is Not Acceptable)
11527 Pyramid Drive
Suite 102
 City **Odessa** **FL** Zip Code **33556**

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

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/17/05

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D/P	<input checked="" type="checkbox"/> Delete
NAME	RICHARDSON, JOSEPH H	
STREET ADDRESS	2346 SUCCESS DRIVE	
CITY-ST-ZIP	ODESSA, FL 33556	

TITLE	DVP	<input checked="" type="checkbox"/> Delete
NAME	TOOMEY, PETER E	
STREET ADDRESS	2346 SUCCESS DRIVE	
CITY-ST-ZIP	ODESSA, FL 33556	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Director & President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	John R. Bailey	
STREET ADDRESS	5000 Legacy Drive, Suite 470	
CITY-ST-ZIP	Plano, TX 75024	

TITLE	Chief Technology Officer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Tom Hebert	
STREET ADDRESS	11527 Pyramid Drive, Suite 102	
CITY-ST-ZIP	Odessa, FL 33556	

TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	David E. Webb	
STREET ADDRESS	5000 Legacy Drive, Suite 470	
CITY-ST-ZIP	Plano, TX 75024	

TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Henry Burkhalter	
STREET ADDRESS	5000 Legacy Drive, Suite 470	
CITY-ST-ZIP	Plano, TX 75024	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

[Signature] **John R. Bailey**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/10/05

DATE

972-943-6000

DAYTIME PHONE #