

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000019582

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: INGERSOLL, MILLER CORPORATION

## Current Principal Place of Business:

1285 GULF SHORE BLVD NORTH  
STE 6D  
NAPLES, FL 34102

## New Principal Place of Business:

9035 EASTERLING DRIVE  
ORLANDO, FL 32819

## Current Mailing Address:

9035 EASTERLING DR.  
ORLANDO, FL 32819 US

## New Mailing Address:

FEI Number: 59-3590713      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: FITZGIBBON, NAOMI  
Address: 1285 GULF SHORE BLVD N 6D  
City-St-Zip: NAPLES, FL 34102

Title: V ( ) Delete  
Name: FITZGIBBON, MITCHELL  
Address: RD #2 QUILLIAM RD  
City-St-Zip: WESTFIELD, NJ 14787

Title: V ( ) Delete  
Name: FITZGIBBON, MICHAEL  
Address: 21565 ABERDEEN RD  
City-St-Zip: ROCKY RIVER, OH 44116

Title: TS ( ) Delete  
Name: FITZGIBBON, MATTHEW  
Address: 9035 EASTERLING DR.  
City-St-Zip: ORLANDO, FL 32819

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MATTHEW J FITZGIBBON

TS

04/29/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date