

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000036483

FILED
Apr 15, 2005
Secretary of State

Entity Name: THERRIEN CONSULTING RESOURCES, INC.

Current Principal Place of Business:

1071 GALGANO AVENUE
DELTONA, FL 32725

New Principal Place of Business:

Current Mailing Address:

3832-010 BAYMEADOWS ROAD
321
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 59-3505091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THERRIEN, MARK S
1071 GALGANO AVENUE
DELTONA, FL 32725 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: COMP () Delete
Name: THERRIEN, AUDREY J
Address: 1071 GALGANO AVENUE
City-St-Zip: DELTONA, FL 327259228

Title: TS () Delete
Name: THERRIEN, MARK S
Address: 1071 GALGANO AVE
City-St-Zip: DELTONA, FL 327259228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COMP (X) Change () Addition
Name: THERRIEN, MARK S
Address: 1071 GALGANO AVENUE
City-St-Zip: DELTONA, FL 327259228

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: MARK S. THERRIEN

CEO

04/15/2005

Electronic Signature of Signing Officer or Director

Date