

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000054316

FILED
Mar 07, 2005
Secretary of State

Entity Name: MANNING CONSULTING, INC.

Current Principal Place of Business:

3959 SPYGLASS HALL RD.
SARASOTA, FL 34238

New Principal Place of Business:

3959 SPYGLASS HILL RD.
SARASOTA, FL 34238

Current Mailing Address:

3959 SPYGLASS HALL RD.
SARASOTA, FL 34238

New Mailing Address:

3959 SPYGLASS HILL RD.
SARASOTA, FL 34238

FEI Number: 65-0921126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANNING, JOHN E
3959 SPYGLASS HILL RD
SARASOTA, FL 34238 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: PTD () Delete
Name: MANNING, JOHN E
Address: 3959 SPYGLASS HILL RD
City-St-Zip: SARASOTA, FL 34238

Title: SD () Delete
Name: MANNING, MARYELLEN
Address: 3959 SPYGLASS HILL RD
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOHN E. MANNING

PTD

03/07/2005

Electronic Signature of Signing Officer or Director

Date