

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000081575

FILED
Feb 24, 2005
Secretary of State

Entity Name: RESEARCH & RESOLUTION, INC.

Current Principal Place of Business:

784 US HWY ONE
STE 22 D
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

4919 GRASSLEAF DRIVE
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

2605 NATURES WAY
PALM BEACH GARDENS, FL 33410

New Mailing Address:

4919 GRASSLEAF DRIVE
PALM BEACH GARDENS, FL 33418

FEI Number: 65-0864681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWEN, FRANK V.E.
2605 NATURES WAY
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

OWEN, FRANK V.E.
4919 GRASSLEAF DRIVE
PALM BEACH GARDENS, FL 33418 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:

02/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: OWEN, FRANK V. E.
Address: 2605 NATURES WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VSD () Delete
Name: OWEN, SUSAN B
Address: 2605 NATURES WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: OWEN, FRANK V. E.
Address: 4919 GRASSLEAF DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D (X) Change () Addition
Name: OWEN, SUSAN B
Address: 4919 GRASSLEAF DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: FRANK V. E. OWEN

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02/24/2005

Electronic Signature of Signing Officer or Director

Date