Zip     Country     Zip     Country     Source	2005 FOR PROFIT CORPORATION ANNUAL REPORT						FILED Feb 23, 2005 8:00 am				
G439 WODDSMAN DR     ZEPHYRHILLS, FL 33544      Principal Place of Busines     A. Mading Address      Suite. Apt. 4. etc.     Suite. Apt. 4. etc.	1. Entity Nam	e									
Suite. Apt R. etc.     01242005     Chy P     CR2E034 (10/03)       Clip & Strin     Clip & State     4. FEI Namber 59-33549075     Applie 59-33549075     Applie Applie 59-33549075       Zip     Country     Zip     Country     8. Centificate of Status Desired     State 57-34 (10/05)       BEDNER, J., JOSEPH A 6439 WOODSMAN DR ZEPHYRHILLS, FL 33544     Name     Name and Address of Courtent Registered Agent     Y. Name and Address of Fourier Registered Agent       Strine Address of Courtent Registered Agent     Y. Name and Address of Fourier Registered Agent     Y. Name and Address of Fourier Registered Agent       BEDNER, J., JOSEPH A 6439 WOODSMAN DR ZEPHYRHILLS, FL 33544     Strine Address (PD. Biox Number is Net Acceptable)     Zip Code       Strine Address (PD. Biox Number is Net Acceptable)     City     FL     Zip Code       Strine Address (PD. Biox Number is Net Acceptable)     The Address (PD. Biox Number is Net Acceptable)     Zip Code       Strine Address (PD. Biox Number is Net Acceptable)     The Address (PD. Biox Number is Net Acceptable)     Zip Code       Strine Address (PD. Biox Number is Net Acceptable)     Strine Address (PD. Biox Number is Net Acceptable)     Zip Code       Strine Address (PD. Biox Number is Net Acceptable)     The Address (PD. Biox Number is Net Acceptable)     Zip Code       Strine Address (PD. Biox Number is Net Acceptable)     Photo Address (PD. Biox Number is Net Acceptable)     Zip Code       Strine Address (PD. B	6439 WOODS	SMAN DR	6439 WOODSMAN DR	14			RIA: INTI ATTA ARTI N	174 ##119.1#1971 1987	) (1 <b>8</b> 4) <b>(18</b> 4) 2 <b>8</b> 7	1981 (1) 1081	
City & State         Disk 2005         City & State           City & State         Country         Zip         Country         Zip         Country         Second State	2. Principal P	lace of Business	3. Mailing Address								
Zip         Country         Zip         Country         Source	Suite, Apt. #, etc.		Suite. Apt. #, etc.			01242005	Chg-P	CR2E034	4 (10/03)		
Contract of Status Lessee      Contract of Status Lessee	City & State		City & State				075			plied For t Applicable	
BEDNER, JR, JOSEPH A 6439 WOODSMAN DR ZEPHYRHILLS, FL 33544     Name       Street Address (P.O. Box Number is Not Acceptable)       City     FL       City     FL       Zip Code       6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Lam familier with, and the obligations of registered agent.       SIGNATURE       agreent, hold or private end agent.       SIGNATURE       agreent, hold or private end agent.       BEDNAR, JosePer JR       SIGNATURE       agreent, hold or private end agent.       Intel Booken, agent agend user in the state of Product. Lam familier with, and afford May 1, 2005 Fee with the \$55,000       SIGNATURE       BEDNAR, JOSPEH JR       BEDNAR, JOSPEH JR       STATE Address       STATE Address       OFFICERS AND DIFECTORS IN The BEDNAR, JOSPEH JR       Deter       STATE Address       OSM       Water Address       STATE Address       OSM       Water Address       OSM       Make       BEDNAR, LOSPEH JR       BEDNAR, LOSPEH JR       STATE Address       OSM       Make       STATE Address       OSM       Make       BEDNAR, KETTH R       STATE Address <td>Zip</td> <td>Country</td> <td>Zip</td> <td>Country</td> <td></td> <td>5. Certificate o</td> <td>f Status Desired</td> <td></td> <td></td> <td></td>	Zip	Country	Zip	Country		5. Certificate o	f Status Desired				
G439 WOODSMAN DR ZEPHYRHILLS, FL 33544  Street Address (P.O. Box Number is Not Acceptable)  City FL 2ip Code City FL 2ip		6. Name and Address of Curren	t Registered Agent	Name		7. Name and A	ddress of New	Registered Ag	jent		
In the above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. Lam familiar with, and the obligations of registered agent.  SIGNATURE	6439 WOODSMAN DR			Street	, Address (i	P.O. Box Number	is Not Acceptab	le)			
Inter codegations of registered agent.   SIGNATURE   Signature, synd of or new news of registered agent and the f appeabale.   (NOTE: Ingrammed Agent and the f appeabale.   ONTE: Ingrammed Agent and the f appeabale.   Inter Nomes: Signature Agent and the f appeabale. <td></td> <td></td> <td></td> <td>City</td> <td>*<del></del> ·</td> <td></td> <td></td> <td>FL</td> <td>Zip Code</td> <td>3</td>				City	* <del></del> ·			FL	Zip Code	3	
ITTLE       DPTC       IDdelate       ITTLE       NAME         BEDNAR, JOSPEH J.R       IDdelate       ITTLE       NAME       IDdelate       ITTLE       IDdelate       IDdelate       ITTLE       IDdelate       IDdelate       ITTLE       IDdelate	SIGNATURE_	Signature, typed or printed name of registered ager	9. Election Campaig	gn Financing	\$5.	00 May Be		DATE			
NAKE     BEDNAR, JOSPEH JR     Internet       STRET ADDRES     6439 WOODSMAN DR       CIY-ST-2P     ZEPHYRHILLS, FL 33544       OTY-ST-2P     SCHWARTZ, CHARLOTTE       NWK     SCHWARTZ, CHARLOTTE       STRET ADDRESS     GY-ST-2P       CIY-ST-2P     ZEPHYRHILLS, FL 33544       OTY-ST-2P     LUTZ, FL 33549       D     STRET ADDRESS       OTY-ST-2P     LUTZ, FL 33549       DTY-ST-2P     LUTZ, FL 33549       D     Delete       NMK     STRET ADDRESS       CIY-ST-2P     LUTZ, FL 33544       D     Delete       NMK     STRET ADDRESS       CIY-ST-2P     LUTZ, FL 33544       D     Delete       NMK     STRET ADDRESS       CIY-ST-2P     CIY-ST-2P       ITTE     Delete       NMK     STRET ADDRESS       CIY-ST-2P     CIY-ST-2P       ITTE     Delete       NMK     STRET ADDRESS       CIY-ST-2P     CIY-ST-2P       TITE     Delete       NMK     STRET ADDRESS       C		· · · · · · · · · · · · · · · · · · ·		11.	·····	ADDITIONS/C	HANGES TO OF	FICERS AND D	DIRECTOR	S IN 11	
NAME     SCHWARTZ, CHARLOTTE     NAME       STRET ADDRESS     6439 WOODSMAN DR     STRET ADDRESS       CITY-ST-2IP     ZEPHYRHILLS, FL 33544     CITY-ST-2IP       TITLE     D     Delete     TITLE       NAME     BEDNAR, KEITH R     STRET ADDRESS     CITY-ST-2IP       TITLE     D     STRET ADDRESS     CITY-ST-2IP       TITLE     D     Change     Change       TITLE     D     Delete     TITLE       NAME     BEDNAR, ERIC     ITTLE     Change       STRET ADDRESS     6439 WOODSMAN DR     CITY-ST-2IP       TITLE     D     Delete     TITLE       NAME     BEDNAR, ERIC     ITTLE     Change       STRET ADDRESS     6439 WOODSMAN DR     STRET ADDRESS     CITY-ST-2IP       CITY-ST-ZIP     ZEPHYRHILLS, FL 33544     CITY-ST-2IP     CITY-ST-2IP       TITLE     NAME     STRET ADDRESS     CITY-ST-2IP       STRET ADDRESS     CITY-ST-2IP     CITY-ST-2IP     Change       TITLE     Delete     TITLE     Lowce, Shecila       NAME     STRET ADDRESS     CITY-ST-2IP     Change       CITY-ST-2IP     CITY-ST-2IP     Change     Change       TITLE     Delete     TITLE     Lowce, Shecila       STRET AD	NAME STREET ADDRESS	BEDNAR, JOSPEH JR 6439 WOODSMAN DR	Delete	NAME STREET ADDRESS	;			l	🗋 Change	Addition	
NAME       BEDNAR, KEITH R       NAME         STRET ADDRESS       2503 MOBILAIRE DR       STRET ADDRESS         CITY-ST-ZP       LUTZ, FL 33549       CITY-ST-ZP         TITLE       D       Deleie       TITLE         NAME       BEDNAR, ERIC       NAME         STRET ADDRESS       6439 WOODSMAN DR       STRET ADDRESS         CITY-ST-ZP       ZEPHYRHILLS, FL 33544       CITY-ST-ZP         TITLE       Deleie       TITLE         NAME       STRET ADDRESS       CITY-ST-ZP         ZEPHYRHILLS, FL 33544       CITY-ST-ZP         TITLE       Deleie       TITLE         NAME       STRET ADDRESS       CITY-ST-ZP         STRET ADDRESS       CITY-ST-ZP       Change       Change         NAME       STRET ADDRESS       CITY-ST-ZP       Change       Change         NAME       Deleite       TITLE       Lowe, Sheila       Change       Change         NAME       STRET ADDRESS       CITY-ST-ZP       Wessky Chaper, F1 335-Y4       CITY-ST-ZP         TITLE       Deleite       TITLE       NAME       Change       Change       Change         NAME       STRET ADDRESS       CITY-ST-ZP       Change       Change       Change	NAME Street address	SCHWARTZ, CHARLOTTE 6439 WOODSMAN DR	_ Delete	NAME STREET ADDRESS				(	Change	Addition	
NAME       BEDNAR, ERIC       NAME         STREET ADDRESS       6439 WOODSMAN DR       STREET ADDRESS         CITY-ST-ZIP       ZEPHYRHILLS, FL 33544       CITY-ST-ZIP         TITLE       Delete       TITLE         NAME       STREET ADDRESS       CITY-ST-ZIP         STREET ADDRESS       CITY-ST-ZIP         STREET ADDRESS       CITY-ST-ZIP         NAME       STREET ADDRESS         CITY-ST-ZIP       Delete         TITLE       Delete         NAME       STREET ADDRESS         CITY-ST-ZIP       CITY-ST-ZIP         TITLE       Delete         NAME       STREET ADDRESS         CITY-ST-ZIP       CITY-ST-ZIP         TITLE       Delete         NAME       STREET ADDRESS         CITY-ST-ZIP       CITY-ST-ZIP         TITLE       Delete         NAME       STREET ADDRESS         CITY-ST-ZIP       STREET ADDRESS         CITY-ST-ZIP       Change         It       It 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 appears in Block 10 or Block         12. I hereby certify that the information supplied with this filing does not quali	NAME Street address	BEDNAR, KEITH R 2503 MOBILAIRE DR	X Delete	NAME STREET ADDRESS					Change	Addition	
NAME     Lowe, Sheila       STREET ADDRESS     STREET ADDRESS       CITY-ST-ZP     CITY-ST-ZP       TITLE     Delete       NAME     Delete       TITLE     Delete       NAME     STREET ADDRESS       CITY-ST-ZP     Chapped, F1 33544       TITLE     Delete       NAME     STREET ADDRESS       CITY-ST-ZP     STREET ADDRESS       STREET ADDRESS     STREET ADDRESS       STREET ADDRESS     STREET ADDRESS       CITY-ST-ZP     STREET ADDRESS       STREET ADDRESS     STREET ADDRESS       STREET ADDRESS     STREET ADDRESS       STREET ADDRESS     STREET ADDRESS       ST	NAME STREET ADDRESS	BEDNAR, ERIC 6439 WOODSMAN DR	🗖 Delete	NAME STREET ADDRESS					🗋 Change	Addition	
NAME         NAME           STREET ADDRESS         STREET ADDRESS           CITY-ST-ZP         CITY-ST-ZP           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 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 confidence on the receivergent state entropy entropy consistence of the corporation or the receivergent state entropy entropy to the start my name appears in Block 10 or B	Name Street address		Deleie	NAME. STREET ADORESS	D Low 262 Wes	e, Sheila 34 Brat sley Cha	ima DR pel, Fl			K Addition	
of the corporation or the receive or Thustee empowered to execute this report as required by Chapter 607, Rorida Statutes; and that my name appears in Block 10 or Blo	NAME STREET ADDRESS		Delete	NAME STREET ADDRESS					Change	Addition	
	of the co	poration or the receiver of sustee em	powered to execute this report :	as required by C	tated in Se have the hapter 607	7. Florida Statutes	; and that my nar	ne appears in	Block 10 or	r Block 11 if	
SIGNATURE: 1-24-05 8/3-973-01 SIGNATURE AND TYPED ON PRINTED NAME OF SIGNATION OFFICER ON DIRECTOR	SIGNAT		PRINTED NAME OF BIGATING OFFICER	OR DIRECTOR		1.20		<u>813</u>	- 973-	0147	