

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000103420

FILED
Apr 20, 2005
Secretary of State

Entity Name: OVERHOLT PROPERTIES, INC.

Current Principal Place of Business:

10460 SW 187 TERR
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

10460 SW 187 TERR
MIAMI, FL 33157

New Mailing Address:

FEI Number: 65-0907029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAIG, OVERHOLT
10460 SW 187TH TER
MIAMI, FL 33157 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: D () Delete
Name: OVERHOLT, ROD E
Address: 9625 S.W. 181 TERRACE
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: OVERHOLT, CRAIG S
Address: 9355 SW 178TH TERRACE
City-St-Zip: MIAMI, FL 33157

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D () Change (X) Addition
Name: OVERHOLT, RODNEY
Address: 10460 SW 187TH TERRACE
City-St-Zip: MIAMI, FL 33157

Title: D () Change (X) Addition
Name: POCQUETTE, NEAL
Address: 10460 SW 187TH TERRACE
City-St-Zip: MIAMI, FL 33157

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: NEAL POCQUETTE

D

04/20/2005

Electronic Signature of Signing Officer or Director

Date