2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# P98000107909

Entity Name: NORTHWEST FLORIDA PROFESSIONAL CONSULTING GROUP, INC.

Current Principal Place of Business:

P O BOX 490
CRESTVIEW, FL 32536

New Principal Place of Business:

Current Mailing Address:

P O BOX 490
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 59-3577988 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TISLOW, JENNIFER
2870 GREYSTONE DRIVE
MILTON, FL 32571 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: P ( ) Delete
Name: TISLOW, JENNIFER D
Address: 2870 GREYSTONE DRIVE
City-St-Zip: MILTON, FL 32571

Title: S ( ) Delete
Name: JOHNS, RETA N
Address: P O BOX 201
City-St-Zip: MILLIGAN, FL 32537

Title: T ( ) Delete
Name: MAX, CLARK W
Address: 6046 BLVD MOULTON RD
City-St-Zip: CRESTVIEW, FL 32536

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

Title: VP ( ) Change (X) Addition
Name: CLARK, TIMOTHY M
Address: P.O. BOX 758
City-St-Zip: CRESTVIEW, FL 32536

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: JENNIFER D. TISLOW PRES 04/29/2005
Electronic Signature of Signing Officer or Director Date