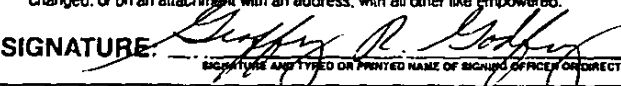


FILED
Mar 10, 2005 8:00 am
Secretary of State

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02-07-2005 90046 002 ***150.00

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P99000000673		
1. Entity Name GODFREY DESIGN & ADVERTISING INC.		
Principal Place of Business 275 96TH AVE NORTH #7 SAINT PETERSBURG, FL 33702		Mailing Address 275 96TH AVE NORTH #7 SAINT PETERSBURG, FL 33702
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent PIPER, JAN J 669 FIRST AVENUE NORTH ST. PETERSBURG, FL		66003977  01042005 No Chg-P CR2E034 (10/03)
8. 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. I am familiar with, and accept the obligations of registered agent.		4. FEI Number 65-0901378 Applied For ☐ Not Applicable
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when filing.)		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GODFREY, GEOFFREY R 710 - 94TH AVE NORTH ST. PETERSBURG, FL 33702	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS O'KEEFE, PAUL S 710 - 94TH AVE NORTH ST. PETERSBURG, FL 33702	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 indicated on this report or 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		3/2/05 579-1899 Date Daytime Phone