2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000002957

Entity Name: DEBOND 2000, INC.

FILED Feb 03, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2015 PORTLAND AVENUE 11924 FOREST HILL BLVD WELLINGTON, FL 33414

22-213

WELLINGTON, FL 334146258

Current Mailing Address: New Mailing Address:

2015 PORTLAND AVENUE 11924 FOREST HILL BLVD

22-213 WELLINGTON, FL 33414

WELLINGTON, FL 334146258

FEI Number: 65-0887106 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DONOVAN, MICHAEL R DONOVAN, MICHAEL R 2015 PORTLAND AVENUE 2015 PORTLAND AVENUE

WELLINGTON, FL 33414 US WELLINGTON, FL 334148008 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: 02/03/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition NORBURN, CHARLES NORBURN, CHARLES Name: Name: 10616 PINE CONE LANE 11924 FOREST HILL BLVD Address: Address: City-St-Zip: FORT PIERCE, FL 34945 City-St-Zip: WELLINGTON, FL 334146258

() Delete Title: Title: PD (X) Change () Addition

Name: DONOVAN, MICHAEL R Name: DONOVAN, MICHAEL R 2015 PORTLAND AVENUE Address: 11924 FOREST HILL BLVD Address: WELLINGTON, FL 33414 WELLINGTON, FL 334146258 City-St-Zip: City-St-Zip:

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: MICHAEL R DONOVAN PD 02/03/2005