

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000019741

Entity Name: 3/POWERS, INC.

FILED  
Apr 01, 2005  
Secretary of State

## Current Principal Place of Business:

8063 RAYMOND STREET  
JACKSONVILLE, FL 32221

## New Principal Place of Business:

2305 KANAKA DRIVE  
JACKSONVILLE, FL 32246

## Current Mailing Address:

8063 RAYMOND STREET  
JACKSONVILLE, FL 32221

## New Mailing Address:

2305 KANAKA DRIVE  
JACKSONVILLE, FL 32246

FEI Number: 59-3561487

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POWERS, WALTER D  
8063 RAYMOND STREET  
JACKSONVILLE, FL 32221 US

## Name and Address of New Registered Agent:

POWERS, WALTER D  
2305 KANAKA DRIVE  
JACKSONVILLE, FL 32246 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: WALTER D POWERS

04/01/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: POWERS, WALTER D  
Address: 8063 RAYMOND STREET  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D ( ) Delete  
Name: POWERS, GERALD  
Address: 8063 RAYMOND STREET  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D ( ) Delete  
Name: POWERS, JEAN  
Address: 8063 RAYMOND STREET  
City-St-Zip: JACKSONVILLE, FL 32221

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: POWERS, WALTER D  
Address: 2305 KANAKA DRIVE  
City-St-Zip: JACKSONVILLE, FL 32246

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: WALTER D POWERS

CEO

04/01/2005

Electronic Signature of Signing Officer or Director

Date