

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S46646

Entity Name: DOCUMENTATION, INC.

FILED
Jan 12, 2005
Secretary of State

Current Principal Place of Business:

5335-1 WHITE CLIFF LANE
SUITE 210
ORLANDO, FL 32812 US

New Principal Place of Business:

PO BOX 536929
ORLANDO, FL 328535929 US

Current Mailing Address:

PO BOX 536929
ORLANDO, FL 328535929 US

New Mailing Address:

FEI Number: 59-3062657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONG, WARREN T.
5335-1 WHITE CLIFF LANE
ORLANDO, FL 32812 US

Name and Address of New Registered Agent:

LONG, WARREN T.
PO BOX 536929
ORLANDO, FL 328535929 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:

01/12/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: LONG, DEBRA K.,
Address: 5335-1 WHITE CLIFF LN
City-St-Zip: ORLANDO, FL

Title: VP () Delete
Name: ORAVSKY, JENNIFER L
Address: 317 CANTERWOOD DRIVE
City-St-Zip: MEBANE, NC 27302

Title: PD () Delete
Name: LONG, WARREN T.,
Address: 5335-1 WHITE CLIFF LN
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: LONG, DEBRA K.,
Address: PO BOX 536929
City-St-Zip: ORLANDO, FL 328535929

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

Title: PD (X) Change () Addition
Name: LONG, WARREN T.,
Address: PO BOX 536929
City-St-Zip: ORLANDO, FL 328535929

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: WARREN T. LONG

PD

01/12/2005

Electronic Signature of Signing Officer or Director

Date