## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S66568

Entity Name: SEDCON, INC.

BONITA SPRINGS, FL 34135

City-St-Zip:

FILED Apr 05, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 25294 PAPILLION DRIVE BONITA SPRINGS, FL 34135 **Current Mailing Address: New Mailing Address:** 25294 PAPILLION DRIVE BONITA SPRINGS, FL 34135 FEI Number: 65-0272737 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: SEDBERRY, PHILLIP P 25294 PAPILLON DR. BONITA SPRINGS, FL 34135 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition SEDBERRY, PHILLIP P. Name: Name: 25294 PAPILLION DRIVE Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: Title: Title: () Change () Addition () Delete Name: SEDBERRY, ROBIN C Name: 25294 PAPILLION DRIVE Address: 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: ROBIN C. SEDBERRY VP 04/05/2005