

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S79553

FILED
Mar 24, 2005
Secretary of State

Entity Name: NODARSE & ASSOCIATES, INC.

Current Principal Place of Business:

1675 LEE ROAD
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

1675 LEE ROAD
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 59-3086122

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAMMAL-NODARSE, LEILA, P.E.
1290 PARK AVE NO
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: JAMMAL-NODARSE, LEIL, A
Address: 1290 PARK AVE
City-St-Zip: WINTER PARK, FL

Title: ST () Delete
Name: JAMMAL, SYLVIA
Address: 1108 SWEETBRIAR RD
City-St-Zip: ORLANDO, FL

Title: COO () Delete
Name: PREIM, MICHAEL
Address: 261 COBLE DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: CFO () Delete
Name: BOETTGER, MAYREEN
Address: 657 ROCKLEDGE DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: D () Delete
Name: DUMHAM, DAN
Address: 4389 STEEL TERRACE
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: JAMMAL, SUHEIL E
Address: 1108 SWEETBRIAR RD.
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: CFO (X) Change () Addition
Name: BOETTGER, MAUREEN
Address: 657 ROCKLEDGE DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

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: MAUREEN BOETTGER

CFO

03/24/2005

Electronic Signature of Signing Officer or Director

Date