2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V32141

Entity Name: JAMES M. WARK & ASSOCIATES, INC.

FILED Mar 08, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

8409 LAND O LAKES BLVD
LAND O' LAKES, FL 34638 US
8409 LAND O LAKES BLVD
LAND O' LAKES, FL 34639 US

Current Mailing Address: New Mailing Address:

8409 LAND O LAKES BLVD P.O. BOX 1476

LAND O' LAKES, FL 34638 US LAND O' LAKES, FL 34638-147 US

FEI Number: 59-3115780 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:

WARK, JAMES M
8409 LAND O' LAKES BLVD
LAND O' LAKES, FL 34638 US
WARK, JAMES M
8409 LAND O' LAKES BLVD
LAND O' LAKES, FL 34639 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: 03/08/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

 Name:
 WARK, JAMES M
 Name:
 WARK, JAMES M

 Address:
 8409 LAND O' LAKES BLVD
 Address:
 8409 LAND O' LAKES BLVD

 City-St-Zip:
 LAND O' LAKES, FL 34638
 City-St-Zip:
 LAND O' LAKES, FL 34639

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

 Name:
 WARK, MATTHEW J
 Name:
 WARK, MATTHEW J

 Address:
 2508 CHATEAU DR
 Address:
 2508 CHATEAU DR

 City-St-Zip:
 LUTZ, FL 33549
 City-St-Zip:
 LUTZ, FL 33559

Title: D () Delete Title: V.P. (X) Change () Addition

 Name:
 WARK, WENDY R
 Name:
 WARK, WENDY R

 Address:
 2508 CHATEAU DR
 Address:
 2508 CHATEAU DR

 City-St-Zip:
 LUTZ, FL 33549
 City-St-Zip:
 LUTZ, FL 33559

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: WENDY R. WARK V.P. 03/08/2005