

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 23, 2005  
Secretary of State**

DOCUMENT# F06067

Entity Name: FAULKNER & SONS, INC.

**Current Principal Place of Business:**

12570 ROSELAND RD.  
P.O.BOX 781437  
SEBASTIAN, FL 32978

**New Principal Place of Business:**

**Current Mailing Address:**

12570 ROSELAND RD.  
P.O.BOX 781437  
SEBASTIAN, FL 32978

**New Mailing Address:**

FEI Number: 59-2059528      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FAULKNER, GARY A  
12570 ROSELAND RD.  
SEBASTIAN, FL 32958      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: DP ( ) Delete  
Name: FAULKNER, GARY A,  
Address: 12570 ROSELAND RD.  
City-St-Zip: SEBASTIAN, FL

Title: S ( ) Delete  
Name: FAULKNER, TRACY L.,  
Address: 12570 ROSELAND RD.  
City-St-Zip: SEBASTIAN, FL

Title: V ( ) Delete  
Name: FAULKNER, ALLEN H,  
Address: 333 SW ORANGE AVE  
City-St-Zip: SEBASTIAN, FL

Title: M ( ) Delete  
Name: FAULKNER, BRANDON A.  
Address: 12570 ROSELAND RD.  
City-St-Zip: SEBASTIAN, 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: ( ) 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: GARY A FAULKNER

DP

04/23/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date