

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 604025

FILED
Feb 05, 2005
Secretary of State

Entity Name: KANE & SHERMAN, P.A. CERTIFIED PUBLIC ACCOUNTANTS

Current Principal Place of Business:

1823 N. 9TH AVE
PENSACOLA, FL 32501 US

New Principal Place of Business:

1823 N. 9TH AVE
PENSACOLA, FL 32503 US

Current Mailing Address:

P O BOX 407
PENSACOLA, FL 32592 US

New Mailing Address:

P O BOX 407
PENSACOLA, FL 325910407 US

FEI Number: 59-1426586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KANE, TIMOTHY D
1823 N. 9TH AVE
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

KANE, TIMOTHY D
1823 N. 9TH AVE
PENSACOLA, FL 32503 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:

02/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KANE, TIMOTHY D.
Address: 1823 N. 9TH AVE
City-St-Zip: PENSACOLA, FL

Title: VPD () Delete
Name: SHERMAN, ROGER VC.
Address: 1823 N 9TH AVE.
City-St-Zip: PENSACOLA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KANE, TIMOTHY D.
Address: 1823 N. 9TH AVE
City-St-Zip: PENSACOLA, FL 32503

Title: VPD (X) Change () Addition
Name: SHERMAN, ROGER VC.
Address: 1823 N 9TH AVE.
City-St-Zip: PENSACOLA, FL 32503

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: TIMOTHY D. KANE

P

02/05/2005

Electronic Signature of Signing Officer or Director

Date