2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 625297

Entity Name: MAX T. WATSON, JR., P.A.

FILED Mar 16, 2005 Secretary of State

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

1515 RIVERSIDE AVENUE, STE B JACKSONVILLE, FL 322041134 1515 RIVERSIDE AVENUE, STE B JACKSONVILLE, FL 32204134

Current Mailing Address: New Mailing Address:

1515 RIVERSIDE AVENUE, STE B JACKSONVILLE, FL 322041134 1515 RIVERSIDE AVENUE, STE B JACKSONVILLE, FL 32204134

FEI Number: 59-1909899 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:

WATSON, MAX T JR 1515 RIVERSIDE AVE, STE B JACKSONVILLE, FL 32204 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: PTD () Delete Title: PTD (X) Change () Addition

Name:WATSON, MAX T JR,Name:WATSON, MAX T JR,Address:1515 RIVERSIDE AVE STE BAddress:1515 RIVERSIDE AVE STE BCity-St-Zip:JACKSONVILLE, FL 322047City-St-Zip:JACKSONVILLE, FL 32204 US

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: MAX T. WATSON, JR. PVT 03/16/2005