


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # 694442
 1. Entity Name
WADLEY AGENCY, INC.



Principal Place of Business Mailing Address
6271 DUPONT STATION COURT **6271 DUPONT STATION COURT**
JACKSONVILLE, FL 32217 US **JACKSONVILLE, FL 32217 US**

DO NOT WRITE IN THIS SPACE



01152005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
59-2108376 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
WADLEY, CHRISTOPHER P
6271 DUPONT STATION COURT
JACKSONVILLE, FL 32217

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

000000183730
 01/20/05-80001-011 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WADLEY, CHRISTOPHER P 6271 DUPONT STATION COURT JACKSONVILLE, FL 00000, 32217
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WADLEY, CHRISTOPHER P 6271 DUPONT STATION COURT JACKSONVILLE, FL 00000, 32217
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: C.P. Wadley C.P. Wadley 1/14/05 9044437996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #