

2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # F03000003562
 1. Entity Name
 STEPHEN A. ESTRIN & CO., INC.



Principal Place of Business
 2114 BISPHAM RD., SUITE 3
 SARASOTA, FL 34231

Mailing Address
 2114 BISPHAM RD., SUITE 3
 SARASOTA, FL 34231



01122005 No Chg-P CR2E034 (10/03)

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4. FEI Number
 14-1564754

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 ESTRIN, KAREN J
 2114 BISPHAM RD., SUITE 3
 SARASOTA, FL 34231

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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: *Karen J. Estrin* **KAREN J. ESTRIN** *1/14/05*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ESTRIN, STEPHEN A
STREET ADDRESS	2114 BISPHAM RD., SUITE 3
CITY-ST-ZIP	SARASOTA, FL 34231
TITLE	VS
NAME	WOLSTENHOLME, GEORGE V
STREET ADDRESS	2114 BISPHAM RD., SUITE 3
CITY-ST-ZIP	SARASOTA, FL 34231
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100000184274
 01/20/05-80015-017 158.75

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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)(d), 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 recipient 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 filers certified.

SIGNATURE: *Stephen A. Estrin*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: *1/14/05* Daytime Phone #: *(954) 964-9661*