

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F55553

FILED  
May 03, 2005  
Secretary of State

Entity Name: INVESTMENT SEMINARS, INC.

**Current Principal Place of Business:**

1258 N PALM AVE  
SARASOTA, FL 34236 US

**New Principal Place of Business:**

**Current Mailing Address:**

1258 N PALM AVE  
SARASOTA, FL 34236 US

**New Mailing Address:**

FEI Number: 59-2146454      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GRIMES, MICHELLE  
200 SOUTH ORANGE AVE  
SARASOTA, FL 34236 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: GITHLER, CHARLES E.  
Address: 374 S. SHORE DRIVE  
City-St-Zip: SARASOTA, FL

Title: P ( ) Delete  
Name: GITHLER, KIM K  
Address: 374 S. SHORE DR.  
City-St-Zip: SARASOTA, FL

Title: S ( ) Delete  
Name: ROSSARD, DEBORAH  
Address: 515 MCKINLEY DR.  
City-St-Zip: SARASOTA, FL 34236

**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:

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: KIM K. GITHLER

P

05/03/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date