

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000005752

FILED  
Jan 07, 2005  
Secretary of State

Entity Name: MARK NORCIA & ASSOCIATES, INC.

## Current Principal Place of Business:

325 CLYDE MORRIS BLVD.  
SUITE #430  
ORMOND BEACH, FL 32174

## New Principal Place of Business:

## Current Mailing Address:

325 CLYDE MORRIS BLVD.  
SUITE #430  
ORMOND BEACH, FL 32174

## New Mailing Address:

FEI Number: 59-3618036

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PALMETTO CHARTER SERVICES, INC.  
150 MAGNOLIA AVE.  
DAYTONA BEACH, FL 321152491 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: NORCIA, MARK  
Address: 325 CLYDE MORRIS BLVD.  
City-St-Zip: ORMOND BEACH, FL 32174

Title: ST ( ) Delete  
Name: NORCIA, EMMA J  
Address: 325 CLYDE MORRIS BLVD.  
City-St-Zip: ORMOND BEACH, FL 32174

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NORCIA, MARK  
Address: 325 CLYDE MORRIS BLVD. STE #430  
City-St-Zip: ORMOND BEACH, FL 32174

Title: ST (X) Change ( ) Addition  
Name: NORCIA, EMMA J  
Address: 325 CLYDE MORRIS BLVD. STE #430  
City-St-Zip: ORMOND BEACH, FL 32174

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: MARK E. NORCIA

PRES

01/07/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date