

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000055698

Entity Name: SHARON CASLOW, CPA, P.A.

FILED  
Jan 26, 2005  
Secretary of State

**Current Principal Place of Business:**

4060 EDGEWATER DR  
ORLANDO, FL 32804

**New Principal Place of Business:**

**Current Mailing Address:**

4060 EDGEWATER DR  
ORLANDO, FL 32804

**New Mailing Address:**

FEI Number: 59-3728542

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

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

CASLOW, SHARON CPA  
224 HUNTRIDGE WAY  
WINTER SPRINGS, FL 32708 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: SHARON CASLOW

01/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: CASLOW, SHARON  
Address: 4060 EDGEWATER DR  
City-St-Zip: ORLANDO, FL 32804

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: SHARON CASLOW

PRES

01/26/2005

Electronic Signature of Signing Officer or Director

Date