


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**


FILED
Jan 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000148924
1. Entity Name
PETE & MARY, INC.



Principal Place of Business 115-G RACETRACK RD., NW, FT. WALTON BEACH, FL 32547 US	Mailing Address 115-G RACETRACK RD., NW, FT. WALTON BEACH, FL 32547 US
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DO NOT WRITE IN THIS SPACE



01152005 No Chg-P CR2E034 (10/03)

4. FEI Number 57-1195540	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FLANAGAN, JOAN M
115-G RACETRACK RD.
FT. WALTON BEACH, FL 32547

**DO NOT WRITE
IN THIS SPACE**

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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD FLANAGAN, JOAN M 900 LAJOLLA LANE FT. WALTON BEACH, FL 32569
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD FLANAGAN, ROBERT G 900 LAJOLLA LANE MARY ESTHER, FL 32569
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

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01/24/05-80043-009 150.00

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: Joan M. Flanagan Joan M. Flanagan, President 1-18-05 850-862-9248
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day Time Phone #