

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000063415

Entity Name: BROCK & ASSOCIATES, INC.

FILED
Aug 15, 2005
Secretary of State

Current Principal Place of Business:

16207 HOYLAKE DRIVE
ODESSA, FL 33556

New Principal Place of Business:

200 2ND AVENUE SOUTH
#515
ST PETERSBURG, FL 33701

Current Mailing Address:

16207 HOYLAKE DRIVE
ODESSA, FL 33556

New Mailing Address:

200 2ND AVENUE SOUTH
#515
ST PETERSBURG, FL 33701

FEI Number: 20-1011736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROCK, VALAREE C
16207 HOYLAKE DRIVE
ODESSA, FL, FL 33556 US

Name and Address of New Registered Agent:

BROCK, VALAREE C
200 2ND AVENUE SOUTH
#515
ST PETERSBURG, FL, FL 33701 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:

08/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROCK, JOEL A
Address: 16207 HOYLAKE DRIVE
City-St-Zip: ODESSA, FL 33556

Title: VP () Delete
Name: BROCK, VALAREE C
Address: 16207 HOYLAKE DRIVE
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BROCK, JOEL A
Address: 200 2ND AVENUE SOUTH #515
City-St-Zip: ST PETERSBURG, FL 33701

Title: VP (X) Change () Addition
Name: BROCK, VALAREE C
Address: 200 2ND AVENUE SOUTH #515
City-St-Zip: ST PETERSBURG, FL 33701

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: JOEL BROCK

P

08/15/2005

Electronic Signature of Signing Officer or Director

Date