2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # P93000063793

1. Entity Name
BISHOP & BUTTREY, INCORPORATED

Principal Place of Business	Mailing Address
6329 EDGEWATER DRIVE SUITE D-1 ORLANDO, FL 32810 US	4940 CAMPBELL BLVD., SUITE 100 BALTIMORE, MD 21236

01072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3200739
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LOWERY, NANCY A
1025 S. SIMORAN BLVD., SUITE 1077
WINTER PARK, FL 32792

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BUTTREY, SR., JOHN W
STREET ADDRESS	6239 EDGEWATER DRIVE., SUITE D-1
CITY-ST-ZIP	ORLANDO, FL 328104747
TITLE	DVS
NAME	LUNDEEN, KENNETH C
STREET ADDRESS	4940 CAMPBELL BLVD, STE 100
CITY-ST-ZIP	BALTIMORE, MD 212365910
TITLE	V
NAME	HOWSON, DAVID G
STREET ADDRESS	4940 CAMPBELL BLVD, STE 100
CITY-ST-ZIP	BALTIMORE, MD 212365910
TITLE	T
NAME	STRAUCH, CHRISTOPHER J
STREET ADDRESS	4940 CAMPBELL BLVD, STE 100
CITY-ST-ZIP	BALTLIMORE, MD 212365910
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/21/05-80047-006 150.00

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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: _____ Christopher J. Strauch, Treasurer 02/28/05 410-931-9595
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #