


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Jul 01, 2005 08:00 AM
Secretary of State**

DOCUMENT # P97000029125
1. Entity Name
PACIFIC CAPITAL CORPORATION



Principal Place of Business Mailing Address
C/O KIM BALL R. BOBBITT C/O KIM BALL R. BOBBITT
1605 MAIN ST 1010 1605 MAIN ST 1010
SARASOTA, FL 34236 SARASOTA, FL 34236

DO NOT WRITE IN THIS SPACE



06282005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
65-0671850 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BOBBITT, KIMBALL R
1605 MAIN ST SUITE 1010
SARASOTA, FL 34236

**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: *Kimball R. Bobbitt* Receiver 6/27/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

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

10. OFFICERS AND DIRECTORS

TITLE	R
NAME	BOBBIT, KIMBALL R
STREET ADDRESS	1605 MAIN ST. 1010
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000369937
07/01/05-80002-014 550.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Kimball R. Bobbitt*, Receiver 6/27/05
Signature and typed or printed name of signing officer or director Date Daytime Phone #