2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S76852

Address:

City-St-Zip:

3343 PATTIE PL

PALM HARBOR, FL 34685

Entity Name: POLARIS ASSOCIATES INC.

FILED Jun 30, 2005 Secretary of State

y		7.000017.11 <u>E</u> 0, 11 1 0.			
Current P	rincipal Place	of Business:	New Principal Pla	New Principal Place of Business:	
2915 SR 5 SUITE 17 CLEARW	90 ATER, FL 3375	9 US			
Current M	lailing Address	s:	New Mailing Add	New Mailing Address:	
2915 SR 5 SUITE 17 CLEARW	90 ATER, FL 3375	9 US			
FEI Number	: 59-3085869	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent	:: Name and Addre	ss of New Registered Agent:	
	HN O. FIELD CIRCLE RBOR, FL 3468				
	named entity s e of Florida.	ubmits this statement for t	he purpose of changing its regis	tered office or registered agent, or both,	
SIGNATU	RE:				
	Electroni	c Signature of Registered	Agent	Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () DIEHL, JOHN O 386 SHEFFIELD PALM HARBOR,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DST () FERRANS, DANI 1515 MICHIGAN PALM HARBOR,	AVE	Address: 1515 N	(X) Change()Addition NS, DANIEL D IICHIGAN AVE HARBOR, FL 34683	
Title: Name: Address: City-St-Zip:	V () RIZZUTO, DAN H 5 HAMMOCK PL SAFETY HARBO	•	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	V () WEIGLE, JOHN	Delete D	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: DANIEL D FERRANS DST 06/30/2005