

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # 265751



Name
 GEORGE A. ISRAEL, JR., INC

Principal Place of Business
 144 WATTS ST.
 JACKSONVILLE, FL 32204

Mailing Address
 P.O. BOX 41106
 JACKSONVILLE, FL 32203



01102005 No Chg-P CR2E034 (10/03)

4. FEI Number
 59-1001532 Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

O'CONNOR, JOHN W.
 1550-A BUSINESS CIRCLE DRIVE
 ORANGE PARK, FL 32003

**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 refinancing)

**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 NAME STREET ADDRESS CITY-ST-ZIP	PD ISRAEL, GEORGE A. III 144 WATTS ST JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CORDERO, KEVIN D. 144 WATTS ST JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COD CHAMBERLAIN, BRYAN 144 WATTS ST. JACKSONVILLE, FL 32204
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 03/08/05-80023-013 150.00

**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)(b), 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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

Date 2/28/05