

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2005 08:00 AM
Secretary of State

DOCUMENT # 369967	
1. Entity Name STEAMATIC OF CENTRAL FLORIDA, INC.	

Principal Place of Business 2716 FORSYTH RD 101 WINTER PARK, FL 32792	Mailing Address 2716 FORSYTH RD 101 WINTER PARK, FL 32792
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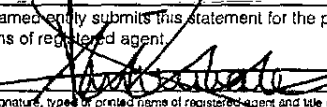
DO NOT WRITE IN THIS SPACE



01172005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1303309	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SULLIVAN, KIMBERLEY 2716 FORSYTH RD STE 101 WINTER PARK, FL 32792	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  N/A	DATE 2/16/05
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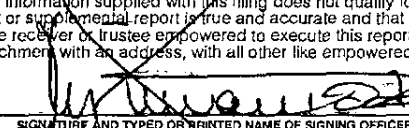
(NOTE: Registered Agent signature required when resigning)

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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD SULLIVAN, JERRY F 2716 FORSYTH RD STE 101 WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDS SULLIVAN-TODD, KIMBERLEY 2716 FORSYTH RD STE 101 WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SULLIVAN, JERRY F. 2716 FORSYTH RD STE 101 WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SULLIVAN, PATRICK 2716 FORSYTH RD STE 101 WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

02/13/05-60027-013 150.00

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: 	DATE 2/16/05	DAYTIME PHONE # 407-681-7277
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR