## 2005 FOR PROFIT CORPORATION

**FILED** Jan 14, 2005 08:00 AM

ANNOAL REPORT						_	·	
DOCU 1. Entity Nan IDLEWH		88418				Sec	cretary of State	
1616 SOUTH	ce of Business H 14TH STREET 0180 FL 34749-0180 U	ds.	Mailing Address P.O. BOX 490180 LEESBURG, FL 34749-018	o us			1888 1886 1886 1888 1888 1888 1888 188	
C	OO NOT	WRITE	IN THIS SPA	ACE	01112005 4. FEI Numb 59-14	No Chg-P	CR2E034 (10/03)  Applied For Not Applicable  \$8.75 Additional Fee Required	
	6. Name and A	dress of Current Re	agistered Agent		,	_	· —	
GREGG, F BROWNE 1616 S 14TH STREET LEESBURG, FL 34748					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. 1 am familiar with, and accept								
the obligations of registered agent.								
SIGNATURE F. BROWNE GREGG (PRESIDENT/DIRECTOR)  Signature, typed or printed name of registered agent and little if applicable  Third E Hegistered Agent signature required when reinstating)  DATE								
After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution.					.00 May Be led to Fees			
10.		OFFICERS AND DI	RECTORS		-		·	
TITLE NAME STREET ADDRESS CITY-ST ZIP	PD GREGG, F, BRC 1616 S 14TH ST LEESBURG, FL		- · · · · · · · · · · · · · · · · · · ·				180451 80006-009 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY: ST: ZIP				_	DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SF	PACE		
TITLE NAME STREET ADDRESS CITY-ST ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP								

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 rue and accurate and that my signature shall have the same legal effect as if made under oath: that if an 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:

F. BROWNE GREGS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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