2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 03, 2005 8:00 am Secretary of State

DOCUMENT # 424151 1. Entity Name IVOR A. SINGER & ASSOCIATES INC								02-03-2005 90053 046 ***150.00						
Principal Place of Business				Mailing Address										
6802 STAPOINT CT. WINTER PARK, FL 32792				6802 STAPOINT CT. WINTER PARK, FL 32792				50010454						
WINTER FARI	L			1 1880) 81919										
2. Principal Place of Business				3. Mailing Address				and the second						
Suite, Apt. #, etc.				Suite, Apt. #, etc.				01042005	Cha D		CBOEA	24 (40(02)		
				Sh. B Chi.								-Vad Fax 1		
City & State				City & State			4	4. FEI Number 59-1465981			Applied For Not Applicable			
Zip	Country		2	Zip Co		ountry		. Certificate	of Status Desi	red		\$8.75 Addi		
	6. Name	and Address of Cur	rent Regist	ered Agent		7	. Name and	Address of N	lew Regi	stered /	\gent			
SINGER, IVOR A JR						Name								
6802 STAPOINT CT. WINTER PARK, FL 32792					Street Address (P.O. Box Number is Not Acceptable)									
WINTERP	ARK, FL	32792							·					
						City					FL	Zip Code	,	
	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	Cignoture bener	or printed name of registered	agent and title if	applicable (NOTE-	Registere	d Agent signature	required whe	un reinstation)			DATE			
	Signature, typec	or histing usung or reflicted		s required trac	in removaling)			DATE:						
		FEE IS \$150.00 5 Fee will be \$5		 Election Campaig Trust Fund Contril 		ncing) May Be to Fees						
10.	OFFICERS AND DIRECTORS						ı	ADDITIONS/	CHANGES TO	OFFICE	RS AND			
TITLE NAME	PD SINGER.	IVOR A JR		☐ Delete	TITLE	I						☐ Change	☐ Addition	
STREET ADDRESS	1616 TIO	GA TRAIL	• • •		9	ET ADDRESS								
CITY-ST-ZIP TITLE	VD	PARK, FL 32789	····	□ Delete	TITLE	-ST-ZIP		•	-	•		☐ Change	Addition	
NAME	SINGER, MARY SCOTT					E					•	Ontaingo		
STREET ADDRESS CITY-ST-2IP	1616 TIOGA TRAIL WINTER PARK, FL 32789					ET ADDRESS								
TITLE	ST	TITLE	. 4	Sea/	Treas	5 5 . 1			Change	Addition				
NAME STREET ADDRESS	MITH, BETH N 2240 GLENWOOD BR					ET ADDRESS	inger	in some	y-Alle	2-1 .W			,	
CITY-ST-ZIP	WINTER PARK, FL 32792					-ST-ZIP	1000 101	er Pa	rk FC	. 37	796	رج		
TITLE				☐ Delete	TITL	- 1			·	_		☐ Change	☐ Addition	
NAME STREET ADDRESS		-		<u>-</u>	. NAM STRE	ET ADDRESS	-	•					~	
CITY-ST-ZIP						-ST-ZIP								
TITLE NAME				Delete	TITL NAM	I .						Change	Addition	
STREET ADDRESS						EET ADDRESS							1	
CITY-ST-ZIP				☐ Delete	TITL	'-ST-ZIP						☐ Change	☐ Addition	
NAME '		· -		□ Detete	NAV							Orienys	L radition	
STREET ADDRESS		7		_ ,		EET ADDRESS /-ST-ZIP						-		
12. Uhereby	certify that the	e information subplied		ling does not qualify for	the exe	emption stated	ed in Section	on 119.07(3)	(i), Florida Sta	tutes. I fu	rther ce	rtify that the i	nformation	
12. I hereby certify that the information supplied with this filling 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.													or director	
SIGNAT	URF∙.	10 M 5	5,200	5 (C	400	1678.	JUSO							
CIGITAL	. • /	1 may	- 60 noures	HAME OF BIOWING OFFICES		400			Date		<u> </u>	Davidina Dhasa d		