## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 455589**

Entity Name: THE C W EMANUEL COMPANY INC

230 NEWPORT DRIVE

VERO BEACH, FL

Address: City-St-Zip: FILED Jan 07, 2005 Secretary of State

Littly Nan	HE C.W. EMANGE COMPANT, INC.			
Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
3006 20TH PO BOX 11 VERO BEA		1850 43RD AVENUE SUITE C-8 VERO BEACH, FL 329	960	
Current Mailing Address:		New Mailing Address	New Mailing Address:	
3006 20TH PO BOX 11 VERO BEA		PO BOX 1179 VERO BEACH, FL 329	961	
FEI Number:	59-1540923 FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
EMANUEL, C. W., JR. 3006 20TH STREET VERO BEACH, FL 32960 US		EMANUEL, C. W., JR. 1850 43RD AVENUE SUITE C-8 VERO BEACH, FL 329	1850 43RD AVENUE	
The above in the State	named entity submits this statement for the $\ensuremath{\rho}$ of Florida.	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:			01/07/2005	
Electronic Signature of Registered Agent		ent	Date	
Election Cam	npaign Financing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete EMANUEL, C. W., 230 NEWPORT DRIVE VERO BEACH, FL	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V () Delete EMANUEL, CASS W III 15 44TH COURT VERO BEACH, FL	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	ST () Delete EMANUEL, TAMSON LYNN,	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: C.W. EMANUEL, JR. P 01/07/2005