2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 557298

Entity Name: JOHN W. ANDREWS, P.A.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3220 HENDERSON BLVD TAMPA, FL 33609

Current Mailing Address: New Mailing Address:

3220 HENDERSON BLVD TAMPA, FL 33609

FEI Number: 59-1793487 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ANDREWS, JOHN W 3220 HENDERSON BLVD TAMPA, FL 33609 US

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD () Delete Title: PTSD (X) Change () Addition

 Name:
 ANDREWS, JOHN W,
 Name:
 ANDREWS, JOHN W,

 Address:
 3220 HENDERSON BLVD
 Address:
 3220 HENDERSON BLVD

City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL 33609

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 ANDREWS, J. TROY
 Name:
 ANDREWS, J. TROY

 Address:
 3220 HENDERSON BLVD
 Address:
 3220 HENDERSON BLVD

 City-St-Zip:
 TAMPA, FL
 City-St-Zip:
 TAMPA, FL
 33609

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.

SIGNATURE: JOHN W. ANDREWS PTSD 04/28/2005