

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 604020

FILED
Jun 28, 2005
Secretary of State

Entity Name: BUNNELL, WOULFE, KIRSCHBAUM, KELLER, MCINTYRE & GREGOIRE, P.A.

Current Principal Place of Business:

ONE FINANCIAL PLAZA, SUITE #900
100 SOUTHEAST 3RD AVENUE
FORT LAUDERDALE, FL 33394 US

New Principal Place of Business:

Current Mailing Address:

ONE FINANCIAL PLAZA, SUITE #900
100 SOUTHEAST 3RD AVENUE
FORT LAUDERDALE, FL 33394 US

New Mailing Address:

FEI Number: 59-1432412

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WOULFE, RICHARD T
ONE FINANCIAL PLAZA, SUITE #900
100 SOUTHEAST 3RD AVENUE
FORT LAUDERDALE, FL 33394 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WOULFE, RICHARD T
Address: 100 SOUTHEAST 3RD AVENUE, #900
City-St-Zip: FORT LAUDERDALE, FL 33394

Title: SD () Delete
Name: KELLER, D. DAVID
Address: 100 SOUTHEAST 3RD AVENUE, #900
City-St-Zip: FORT LAUDERDALE, FL 33394

Title: VPD () Delete
Name: KIRSCHBAUM, JOEL L
Address: 100 SOUTHEAST 3RD AVENUE, #900
City-St-Zip: FORT LAUDERDALE, FL 33394 US

Title: TD () Delete
Name: MCINTYRE, W. EDWARD
Address: 100 SOUTHEAST 3RD AVE., #900
City-St-Zip: FORT LAUDERDALE, FL 33394 US

Title: VPD () Delete
Name: GREGOIRE, NANCY W
Address: 100 SOUTHEAST 3RD AVE., #900
City-St-Zip: FORT LAUDERDALE, FL 33394

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RICHARD T. WOULFE

PD

06/28/2005

Electronic Signature of Signing Officer or Director

Date