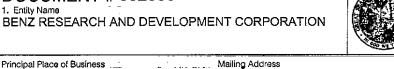
2005 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT #652399

FILED Mar 07, 2005 08:00 AM Secretary of State



Principal Place of Business .___ 6447 PARKLAND DR. SARASOTA, FL 34243 US

SIGNATURE:

P 0 BOX 1839 SARASOTA, FL 34230



01272005 DO NOT WRITE IN THIS SPACE

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-1981261 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

941-758-8256

6. Name and Address of Current Registered Agent ESSENSON, JAMES L. 2071 MAIN STREET SARASOTA, FL 34237

DO NOT WRITE IN THIS SPACE

			ļ. <u></u>		
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 Signature, typoid or printed name of negistered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHRISTENSEN, ALICE 5010 VANDERIPE RD SARASOTA, FL 34241				-
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS BENZ, PATRICK H. 6447 PARKLAND DR SARASOTA, FL	-			000000254716 03/07/05-80083-017 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ORS, JOSE A. 6447 PARKLAND DR. SARASOTA, FL	_	ļ	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
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 trugand 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 any participant, with all given like empowered.					