

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004355

FILED  
Jan 04, 2005  
Secretary of State

Entity Name: DAVID H. POLLOCK CONSULTANTS, INC.

## Current Principal Place of Business:

99 KINDERKAMACK ROAD, SUITE 301  
WESTWOOD, NJ 07675

## New Principal Place of Business:

## Current Mailing Address:

99 KINDERKAMACK ROAD, SUITE 301  
WESTWOOD, NJ 07675

## New Mailing Address:

FEI Number: 22-3187622

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SEWARD, JAMES L  
12201 RESEARCH PARKWAY  
ORLANDO, FL 32826 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSC ( ) Delete  
Name: POLLOCK, DAVID H  
Address: 99 KINDERKAMACK ROAD, SUITE 301  
City-St-Zip: WESTWOOD, NJ 07675

Title: D ( ) Delete  
Name: POLLOCK, JONATHAN D  
Address: 99 KINDERKAMACK ROAD, SUITE 301  
City-St-Zip: WESTWOOD, NJ 07675

Title: D ( ) Delete  
Name: KENNEDY, PETE  
Address: 99 KINDERKAMACK ROAD, SUITE 301  
City-St-Zip: WESTWOOD, NJ 07675

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: POLLOCK, JAMES  
Address: 99 KINDERKAMACK ROAD, SUITE 301  
City-St-Zip: WESTWOOD, NJ 07675

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: JAMES POLLOCK

D

01/04/2005

Electronic Signature of Signing Officer or Director

Date