

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90303 016 ***150.00

DOCUMENT # F15599



1. Entity Name
**CAMERON, HODGES, COLEMAN, LAPOINTE & WRIGHT,
P.A.**

Principal Place of Business
**432 S. BEACH STREET
DAYTONA BEACH, FL 32114**

Mailing Address
**432 S. BEACH STREET
DAYTONA BEACH, FL 32114**

50043535



2. Principal Place of Business
150 South Palmetto Ave.

3. Mailing Address
150 S. Palmetto Ave.

Suite, Apt. #, etc.
Suite 101

Suite, Apt. #, etc.
Suite 101

02012005

Chg-P

CR2E034 (10/03)

City & State
Daytona Beach, Florida

City & State
Daytona Beach, Florida

4. FEI Number
59-2042621

Applied For
Not Applicable

Zip Country
32114 USA

Zip Country
32114 USA

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CAMERON A. CRAIG
15 W CHURCH STREET
STE 301
ORLANDO, FL 32801-3351**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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, typed or printed name of registered 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 DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CAMERON, A CRAIG 15 W CHURCH STREET STE 301 ORLANDO, FL 328013351 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HODGES, E PEYTON 15 W CHURCH STREET STE 301 ORLANDO, FL 328013351 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD COLEMAN, CHRISTOPHER C 25 E SILVER SPRINGS BLVD OCALA, FL 34470 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAPOINTE, DOUGLAS J 15 W CHURCH STREET STE 301 ORLANDO, FL 32801 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WRIGHT, VIRGIL III 25 E SILVER SPRINGS BLVD OCALA, FL 34470 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 true and 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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A. Craig Cameron - President

4/21/05

Date

Daytime Phone #