FILED
Feb 02, 2005 08:00 AM
Secretary of State

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F56391

1. Entity Name
OBERBECK & ASSOCIATES, INC.

Principal Place of Business	Mailing Address
%RENE' G. VANDEVOORDE 1327 N. CENTRAL AVE. SEBASTIAN, FL 32958	%RENE' G. VANDEVOORDE 1327 N. CENTRAL AVE. SEBASTIAN, FL 32958

DO NOT WRITE IN THIS SPACE

01242005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2152048

Applied For ☐
Not Applicable ☐

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

6. Name and Address of Current Registered Agent

VANDEVOORDE, RENE G
1327 NORTH CENTRAL AVENUE
SEBASTIAN, FL 32958

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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 — Registered Agent signature required when reinstated — 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	PTD
NAME	OBERBECK, FRANCIS J
STREET ADDRESS	601 LAYPORT DRIVE
CITY-ST-ZIP	SEBASTIAN, FL 00000.
TITLE	VSD
NAME	OBERBECK, CAROL J
STREET ADDRESS	601 LAYPORT DRIVE
CITY-ST-ZIP	SEBASTIAN, FL 00000.
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Francis J Oberbeck Francis J Oberbeck 1/28/05 772-589-2223
Signature and typed or printed name of officer or director — Date — Daytime Phone #