


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Apr 22, 2005 08:00 AM  
Secretary of State**

<b>DOCUMENT # F95000002587</b> 1. Entity Name LINDA JOWERS & ASSOCIATES, P.C.	
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Principal Place of Business 1000 W 11TH STREET PANAMA CITY, FL 32401 US	Mailing Address 1000 W 11TH STREET PANAMA CITY, FL 32401 US
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**DO NOT WRITE IN THIS SPACE**



04182005 No Chg-P CR2E034 (10/03)

4. FEI Number 63-0985491	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  
  
LEASE-JOWERS, LINDA  
1000 W 11TH STREET  
PANAMA CITY, FL 32401

**DO NOT WRITE  
IN THIS SPACE**

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 Linda James Lease DATE 4/18/05  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LEASE, LINDA J 101 WINDWARD CT. PANAMA CITY, FL 32413
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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U00000324873  
04/22/05-80111-007 150.00

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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)(f), 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: Linda James Lease DATE 4/18/05 (850) 913-8313  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #