

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2005 8:00 am
Secretary of State

03-30-2005 90046 049 ***150.00

DOCUMENT # G10003 1. Entity Name ETW & ASSOCIATES ARCHITECT/PLANNER, INC.																																																																																																																																																											
Principal Place of Business C/O EDWARD T. WEINER 7301 NW 4TH ST, SUITE 105 PLANTATION, FL 33317			Mailing Address C/O EDWARD T. WEINER 7301 NW 4TH ST, SUITE 105 PLANTATION, FL 33317																																																																																																																																																								
2. Principal Place of Business 4980 TAMIA M. TRAIL N.			3. Mailing Address 4980 TAMIA M. TRAIL N.																																																																																																																																																								
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Country COLLIER			Country COLLIER																																																																																																																																																								
6. Name and Address of Current Registered Agent WEINER, EDWARD T. 7301 NW 4TH ST SUITE 105 PLANTATION, FL 33317				7. Name and Address of New Registered Agent 4980 TAMIA M. TRAIL N. #200 SUITE 6 NAPLES, FL. 34103 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. EDWARD T. WEINER SIGNATURE: _____ DATE: 03/28/05 <small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">PD <input type="checkbox"/> Delete</td> <td style="width: 30%;"></td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> <td style="width: 30%;"></td> </tr> <tr> <td>NAME</td> <td>WEINER, EDWARD T</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>7301 NW 4TH ST, SUITE 105</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>PLANTATION, FL</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>4980 TAMIA M. TRAIL N. <input type="checkbox"/> Delete</td> <td></td> <td>TITLE</td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td>#200 SUITE 6 <input type="checkbox"/> Delete</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>NAPLES, FL 34103</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Delete</td> <td></td> <td>TITLE</td> <td>Change <input type="checkbox"/> Addition <input type="checkbox"/></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Delete</td> <td></td> <td>TITLE</td> <td>Change <input type="checkbox"/> Addition <input type="checkbox"/></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Delete</td> <td></td> <td>TITLE</td> <td>Change <input type="checkbox"/> Addition <input type="checkbox"/></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Delete</td> <td></td> <td>TITLE</td> <td>Change <input type="checkbox"/> Addition <input type="checkbox"/></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	PD <input type="checkbox"/> Delete		TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>		NAME	WEINER, EDWARD T		NAME			STREET ADDRESS	7301 NW 4TH ST, SUITE 105		STREET ADDRESS			CITY-ST-ZIP	PLANTATION, FL		CITY-ST-ZIP			TITLE	4980 TAMIA M. TRAIL N. <input type="checkbox"/> Delete		TITLE			NAME	#200 SUITE 6 <input type="checkbox"/> Delete		NAME			STREET ADDRESS	NAPLES, FL 34103		STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE	<input type="checkbox"/> Delete		TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>		NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE	<input type="checkbox"/> Delete		TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>		NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE	<input type="checkbox"/> Delete		TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>		NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE	<input type="checkbox"/> Delete		TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>		NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			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. EDWARD T. WEINER SIGNATURE: _____ 239-213- _____ 2766 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																																											

50032402



03082005 Chg-P CR2E034 (10/03)

4. FEI Number
59-2230998
Applied For
Not Applicable

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