

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2005 8:00 am
Secretary of State

02-28-2005 90196 034 ***150.00

DOCUMENT # G94042

1. Entity Name
SCRUGGS & CARMICHAEL, P.A.



40024217

Principal Place of Business
**ONE SOUTHEAST FIRST AVENUE
GAINESVILLE, FL 32601**

Mailing Address
**ONE SOUTHEAST FIRST AVENUE
GAINESVILLE, FL 32601**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02222005 Chg-P CR2E034 (10/03)

4. FEI Number
59-2391595

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CUSHMAN ESQ, STAN
ONE SOUTHEAST FIRST AVENUE
GAINESVILLE, FL 32601**

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. CHANGES TO OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete
NAME **CUSHMAN, STAN**
STREET ADDRESS **ONE SOUTHEAST FIRST AVE**
CITY-ST-ZIP **GAINESVILLE, FL**

TITLE **D** ☐ Change ☒ Addition
NAME **Littell, Charles W.**
STREET ADDRESS **One Southeast First Avenue**
CITY-ST-ZIP **Gainesville, FL 32601**

TITLE **D** ☐ Delete
NAME **DELANEY, PHILIP A.**
STREET ADDRESS **ONE SOUTHEAST FIRST AVE**
CITY-ST-ZIP **GAINESVILLE, FL**

TITLE **D** ☐ Change ☒ Addition
NAME **Stinson, John G.**
STREET ADDRESS **One Southeast First Avenue**
CITY-ST-ZIP **Gainesville, FL 32601**

TITLE **DS** ☐ Delete
NAME **AUSTIN, MITZI C.**
STREET ADDRESS **ONE SOUTHEAST FIRST AVE**
CITY-ST-ZIP **GAINESVILLE, FL**

TITLE **D** ☐ Change ☒ Addition
NAME **Specie, Karen K.**
STREET ADDRESS **One Southeast First Avenue**
CITY-ST-ZIP **Gainesville, FL 32601**

TITLE **D** ☐ Delete
NAME **LARCHE, JAMES G JR.**
STREET ADDRESS **ONE SOUTHEAST FIRST AVE.**
CITY-ST-ZIP **GAINESVILLE, FL 32601**

TITLE **D** ☐ Change ☒ Addition
NAME **Daly, Kevin**
STREET ADDRESS **One Southeast First Avenue**
CITY-ST-ZIP **Gainesville, FL 32601**

TITLE **D** ☐ Delete
NAME **ROSCOW, JOHN F III**
STREET ADDRESS **ONE SOUTHEAST FIRST AVE.**
CITY-ST-ZIP **GAINESVILLE, FL 32601**

TITLE **D** ☐ Change ☒ Addition
NAME **Ivey, Raymond M**
STREET ADDRESS **One Southeast First Ave**
CITY-ST-ZIP **Gainesville, FL 32601**

TITLE **D** ☐ Delete
NAME **SAIER, FRANK P**
STREET ADDRESS **ONE SOUTHEAST FIRST AVE.**
CITY-ST-ZIP **GAINESVILLE, FL 32601**

TITLE **D** ☐ Change ☒ Addition
NAME **Dollinger, Jeffrey D.**
STREET ADDRESS **One Southeast First Avenue**
CITY-ST-ZIP **Gainesville, FL 32601**

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:

Stan Cushman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stan Cushman
President

2/25/05

352-376-5242

ATTACHMENT

40024217

G94042

TITLE: D
NAME:
STREET ADDRESS:
CITY-ST-ZIP

ADDITION
BRASWELL, JEFFERSON M.
ONE SOUTHEAST FIRST AVENUE
GAINESVILLE, FL 32601

TITLE: D
NAME:
STREET ADDRESS:
CITY-ST-ZIP

ADDITION
JURECKO, KEVIN
ONE SOUTHEAST FIRST AVENUE
GAINESVILLE, FL 32601

TITLE: D
NAME:
STREET ADDRESS:
CITY-ST-ZIP

DELETION
COKER, MARY DAY
ONE SOUTHEAST FIRST AVENUE
GAINESVILLE, FL 32601