


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2005 8:00 am
Secretary of State

07-11-2005 90195 010 ***150.00

DOCUMENT # H39136 1. Entity Name DOUGLAS M. LAMPE, INC.			
Principal Place of Business 1110 PINELLAS BAYWAY SUITE 200 TIERRA VERDE, FL 33715 US		Mailing Address 1110 PINELLAS BAYWAY SUITE 200 TIERRA VERDE, FL 33715 US	
2. Principal Place of Business 730-64th Ave Suite, Apt. #, etc.		3. Mailing Address 730-64th Ave Suite, Apt. #, etc.	
City & State St Pete Bch, Florida Zip 33706		City & State St Pete Bch, Florida Zip 33706	
Country USA		Country USA	
4. FEI Number 59-2505795		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LAMPE, DOUGLAS M. 1110 PINELLASBAYWAY SUITE 200 TIERRA VERDE, FL 33715		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: <u><i>Douglas M. Lampe</i></u> DATE: <u>7/6/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (If not registered agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LAMPE, DOUGLAS M. 1110 PINELLAS BAYWAY, STE. 200 TIERRA VERDE, FL 33715 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAMPE, RUSSELL A. 1110 PINELLAS BAYWAY, STE. 200 TIERRA VERDE, FL 33715 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <u><i>Douglas M. Lampe</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <u>7/6/05</u> Daytime Phone #: <u>727-867-1847</u>	