

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H44759

FILED
Jan 14, 2005
Secretary of State

Entity Name: OLIVER & COMPANY, P.A., CERTIFIED PUBLIC ACCOUNTANTS

Current Principal Place of Business:

18 N. BROAD STREET
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

18 N. BROAD STREET
BROOKSVILLE, FL 34601

New Mailing Address:

FEI Number: 59-2485874 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GARY, MARY BETH
18 N. BROAD ST.
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: PATTERSON, O. CLINTO, N
Address: 5332 PATRICIA PLACE
City-St-Zip: SPRING HILL, FL

Title: PM () Delete
Name: GARY, MARY BETH
Address: 9311 WALLIEN DR
City-St-Zip: BROOKSVILLE, FL

Title: STD () Delete
Name: DEASON, C. K
Address: 10004 KIMBROUGH DR
City-St-Zip: BROOKSVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: PATTERSON, O. CLINTO, N
Address: 5332 PATRICIA PLACE
City-St-Zip: SPRING HILL, FL 34607

Title: PM (X) Change () Addition
Name: GARY, MARY BETH
Address: P.O BOX 1026
City-St-Zip: BROOKSVILLE, FL 34605 10

Title: STD (X) Change () Addition
Name: DEASON, C. K
Address: 10004 KIMBROUGH DR
City-St-Zip: BROOKSVILLE, FL 34601

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY BETH GARY

PM

01/14/2005

Electronic Signature of Signing Officer or Director

_____ Date