

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J20163

FILED
Jan 07, 2005
Secretary of State

Entity Name: CANTER & MCDANIEL, C.P.A.'S, P.A.

Current Principal Place of Business:

CANTER & MCDANIEL, CPA'S , PA
2100 WEST BAY DR.
LARGO, FL 33770

New Principal Place of Business:

Current Mailing Address:

CANTER & MCDANIEL, CPA'S , PA
2100 WEST BAY DR.
LARGO, FL 33770

New Mailing Address:

FEI Number: 59-2684077 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDANIEL, BERTA M
2100 WEST BAY DR.
LARGO, FL 33770 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: PD () Delete
Name: CANTER, RICHARD B,
Address: 2100 WEST BAY DRIVE
City-St-Zip: LARGO, FL

Title: ST () Delete
Name: MCDANIEL, BERTA MARIA
Address: 2100 W BAY DR
City-St-Zip: LARGO, FL 33770

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CANTER, RICHARD B
Address: 2100 WEST BAY DRIVE
City-St-Zip: LARGO, FL 33770

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BERTA MARIA MCDANIEL

ST

01/07/2005

Electronic Signature of Signing Officer or Director

_____ Date