

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J31552

FILED
Apr 25, 2005
Secretary of State

Entity Name: WILLIAM S. HOWELL, JR., J.D., P.A.

Current Principal Place of Business:

1884 S CO HWY 393
SUITE 200
SANTA ROSA BEACH, FL 32459 US

New Principal Place of Business:

1727 S CO HWY 393
SANTA ROSA BEACH, FL 32459 US

Current Mailing Address:

PO BOX 2299
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: 59-2794149 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HOWELL, WILLIAM S., JR.
262 TRADEWINDS DR
SANTA ROSA BEACH, FL 32459 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: DP () Delete
Name: HOWELL, WILLIAM S., JR.
Address: 262 TRADEWINDS DR
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: HOWELL, WILLIAM S., JR.
Address: 262 TRADEWINDS DR
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: WILLIAM S. HOWELL, JR.

DPS

04/25/2005

Electronic Signature of Signing Officer or Director

Date