## **2005 FOR PROFIT CORPORATION ANNUAL REPORT**

## DOCUMENT # J46035

1. Entity Name

WATERMAN & ASSOCIATES, INC.



**FILED** Feb 26, 2005 08:00 AM Secretary of State

Principal Place of Business

6626 JENNIFER DRIVE

P.O. BOX 16554

TEMPLE TERRACE, FL 33617-3554

Mailing Address

6626 JENNIFER DRIVE P.O. BOX 16554

TEMPLE TERRACE, FL 33617-3554



$\mathbf{O}$	NOT	WRITE	IN	THIS	SPACI	
	NUL	VVINII	HIM	iniə	SPACI	

01102005 No Chg-P

CR2E034 (10/03)

(813)

988-8435 Daytime Phone #

4. FEI Number 59-2897780

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLS, ROGER O. ESQ. 4204 N NEBRASKA AVE. TAMPA, FL 33603

## DO NOT WRITE IN THIS SPACE

		- ,				10L						
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		· · · · · · · · · · · · · · · · · · ·	DATE	70.74								
Signature, types	d or printed name of registered agent and title	1 applicable (NOTE Hegistored	Ageni signature	required when reinstaling)	<del></del>	DAIL						
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financ Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees								
10.	OFFICERS AND DIREC	TORS	-									
STREET ADDRESS 6626 JEN	MAN, JEANNIE INIFER DRIVE TERRACE, FL 336172527				U000002 02/26/05-8	44868 0036-025	150.00					
STREET ADDRESS 6626 JEN	AAN, LYLE INIFER DRIVE TERRACE, FL 336172527	· · · · · · · · · · · · · · · · · · ·		·								
TITLE NAME STREET ADDRESS GITY-ST-ZIP				DO	NOT WI	RITE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			!	IN	THIS SPA	ACE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP												
TITLE												
NAME												
STREET ADDRESS CITY-ST-ZIP												
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.												

D. Waterman