2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J51419

Entity Name: PINKSTON & PINKSTON, P.A.

FILED Jan 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

% DAVID J. PINKSTON P. O. BOX 4608 JACKSONVILLE, FL 32201

Current Mailing Address: New Mailing Address:

% DAVID J. PINKSTON P. O. BOX 4608 JACKSONVILLE, FL 32201

FEI Number: 59-2756444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PINKSTON, DAVID J
2263 ST JOHNS AVENUE
JACKSONVILLE, FL 32204 US
PINKSTON, DAVID J
P.O. BOX 4608
JACKSONVILLE, FL 32201
JACKSONVILLE, FL 32201

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: DAVID J. PINKSTON 01/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 PINKSTON, DAVID J
 Name:
 PINKSTON, DAVID J

 Address:
 2263 ST JOHNS AVENUE
 Address:
 P.O. BOX 4608

City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: JACKSONVILLE, FL 32201

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: DAVID J. PINKSTON DP 01/28/2005