

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J57178

FILED  
Mar 09, 2005  
Secretary of State

Entity Name: FLORIDA CREDIT RESEARCH, INC.

**Current Principal Place of Business:**

100 NW 70TH AVENUE  
STE 200  
PLANTATION, FL 33317 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 19359  
PLANTATION, FL 33318 US

**New Mailing Address:**

FEI Number: 59-2779287

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JACOBSON, JAMES CARY  
100 NW 70TH AVENUE  
STE 200  
PLANTATION, FL 33317 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: JACOBSON, JAMES CARY,  
Address: 100 NW 70TH AVENUE, SUITE 200  
City-St-Zip: PLANTATION, FL 33317 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: JAMES CARY JACOBSON

PD

03/09/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date