2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2005
Secretary of State

DOCUMENT# J98257

Entity Name: HICKS, FRANKENBERG & ASSOCIATES, P.A.

Current Principal Place of Business:

28163 US 19 N, SUITE 204
CLEARWATER, FL 33761 US

New Principal Place of Business:

Current Mailing Address:

28163 US 19 N, SUITE 204
CLEARWATER, FL 33761 US

New Mailing Address:

FEI Number: 59-2848933 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HICKS, MICHAEL
28163 US HWY 19 N
SUITE 204
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

HICKS, MICHAEL D PD
28163 US HWY 19 N
SUITE 204
CLEARWATER, FL 33761 US

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: MICHAEL D. HICKS 03/25/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HICKS, MICHAEL,
Address: 28163 US HWY 19 N
City-St-Zip: CLEARWATER, FL 33761

Title: ST ( ) Delete
Name: FRANKENBERG, DON,
Address: 28163 US HWY 19 N
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HICKS, MICHAEL D PD
Address: 28163 US HWY 19 N
City-St-Zip: CLEARWATER, FL 33761

Title: ST (X) Change ( ) Addition
Name: FRANKENBERG, DON R ST
Address: 28163 US HWY 19 N
City-St-Zip: CLEARWATER, FL 33761

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: MICHAEL D. HICKS PD 03/25/2005
Electronic Signature of Signing Officer or Director Date