

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L14937

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: AUDIO REPRESENTATIVES, INC.

## Current Principal Place of Business:

5690 DEREK AVENUE  
SARASOTA, FL 34233

## New Principal Place of Business:

1891 PORTER LAKE DRIVE  
SUITE 104  
SARASOTA, FL 34240

## Current Mailing Address:

5690 DEREK AVENUE  
SARASOTA, FL 34233

## New Mailing Address:

1891 PORTER LAKE DRIVE  
SUITE 104  
SARASOTA, FL 34240

FEI Number: 65-0139882

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCOVILL, HAROLD W.  
1605 MAIN STREET  
SUITE 912  
SARASOTA, FL 33577 US

## Name and Address of New Registered Agent:

SCOVILL, HAROLD W.  
1605 MAIN STREET  
SUITE 912  
SARASOTA, FL 34236 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:

01/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: CHAFEE, MICHAEL,  
Address: 4844 GREY MOSS LANE  
City-St-Zip: SARASOTA, FL 34233 US

Title: SD ( ) Delete  
Name: CHAFEE, CAROLE L.,  
Address: 4844 GREY MOSS LANE  
City-St-Zip: SARASOTA, FL 34233 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHAEL CHAFEE

PTD

01/06/2005

Electronic Signature of Signing Officer or Director

Date