


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2005 8:00 am
Secretary of State

03-24-2005 90037 032 ***150.00

DOCUMENT # L39170 1. Entity Name DONALD MESCIA, INC., A-1 BAIL BONDS			
Principal Place of Business 1001 N WASHINGTON BLVD SUITE 211 SARASOTA, FL 34236		Mailing Address 1001 N WASHINGTON BLVD SUITE 211 SARASOTA, FL 34236 US	
2. Principal Place of Business 5049 Ringwood Meadow Suite, Apt. #, etc. Suite H City & State Sarasota, FL Zip 34235		3. Mailing Address 5049 Ringwood Meadow Suite, Apt. #, etc. Suite H City & State Sarasota, FL Zip 34235	
4. FEI Number 65-0168488		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired - <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PFLAUM, FRED S. 100 WALLACE AVENUE, SUITE 210 SARASOTA, FL 34237		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D NAME MESCIA, DONALD STREET ADDRESS 1001 N WASHINGTON BLVD SUITE 211 CITY-ST-ZIP SARASOTA, FL 34236	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 5049 Ringwood Meadow, Suite H Sarasota, FL 34235	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP NAME MESCIA, MAUREEN STREET ADDRESS 1001 N WASHINGTON BLVD, SUITE 211 CITY-ST-ZIP SARASOTA, FL 34236	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 5049 Ringwood Meadow, Suite H Sarasota, FL 34235	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.			
SIGNATURE: Maureen D Mescia <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		3-21-05 941-3663242 <small>Date Daytime Phone #</small>	