## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L72728

City-St-Zip:

JACKSONVILLE, FL 32210

Entity Name: MULTIPLE MANAGEMENT COMPANY, INC.

FILED Jul 12, 2005 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
3155 WAVERING LANE MIDDLEBURG, FL 32068				5115 ORTEGA FARMS BLVD JACKSONVILLE, FL 32210	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
3155 WAVERING LANE MIDDLEBURG, FL 32068			7628-7 103RD ST. JACKSONVILLE, FL 3	7628-7 103RD ST. JACKSONVILLE, FL 32210	
FEI Number:	: 65-0508341	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
4309 PABĹ SUITE FIV	, FRANK R LO OAKS COU E VILLE, FL 322				
	named entity s e of Florida.	ubmits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUF	RE:				
	Electron	c Signature of Registered Ag	ent	Date	
		(2)(b), F.S., the corporation did n Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS	S AND DIRECT	ORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	PST () HUSSAIN, SYED 5115 ORTEGA		Title: Name: Address:	( ) Change ( ) Addition	

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: SYED S HUSSAIN PST 07/12/2005