


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 26, 2005 8:00 am
Secretary of State

07-26-2005 90025 036 ***150.00

| | |
|---|---|
| DOCUMENT # L98093 1. Entity Name SYDNEY & COMPANY INC. |  |
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|--|--|
| Principal Place of Business 2901 W. BAY DR. BELLEAIR BLUFFS, FL 33770 US | Mailing Address 2901 W. BAY DR. BELLEAIR BLUFFS, FL 33770 US |
|--|--|

50057614



07122005 No Chg-P CR2E034 (10/03)

| | |
|---|-------------------------------|
| 4. FEI Number 59-3023599 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

DO NOT WRITE IN THIS SPACE

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|---|
| 6. Name and Address of Current Registered Agent SID J. MULLINS 3723 SHADY BLUFFS DRIVE LARGO, FL 33770 |
|---|

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

| | | |
|---|--|--|
| FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
|---|--|--|

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD MULLINS, SHARON L. 3723 SHADY BLUFFS DR. LARGO, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V MULLINS, SID 3723 SHADY BLUFFS DRIVE LARGO, FL |
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**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-21-05 *727 585 5520*

ATTACHMENT

50057614

July 21, 2005

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O.BOX 6327
TALLAHASSEE, FLORIDA
32314

SYDNEY & COMPANY, INC
2901 W. BAY DRIVE
BELLE AIR BLUFFS, FLORIDA
33770 727-585-5520

Ref:# L98093

Letter Number: 805A00045899

In an attempt to comply with the state regulations. To file a annual report form, I find that through a series of errors. I am remiss. I must report that I failed to receive what was the original notification to file the report. Then when receiving what I believe to be the second delinquent notice, I filed the wrong report.

I can only ask that the state, take this as an exception, and ask that the late fees be waived. Please find my check for filing enclosed with what I believe to be the correct form.

I wonder if a different method might be found to notify people like myself, of the time to re-new the report. I do know that in trying to follow the directions via the web, I was un-able to complete correctly the requested report.

Sid Mullins
3723 Shady Bluffs Dr.
Largo, Florida, 33770



727-585-3616