## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000003386

KAPLAN, GARY J

1785 14TH AVE.

VERO BEACH, FL 32960

Name:

Address:

City-St-Zip:

FILED Jun 29, 2005 Secretary of State

Entity Na	me: SO ON AND SO FORTH, INC.			
Current P	rincipal Place of Business:	New Principal Pla	New Principal Place of Business:	
14313 CAF TAMPA, F	PITOL DRIVE L 33613			
Current Mailing Address:		New Mailing Addr	New Mailing Address:	
14313 CAF TAMPA, F	PITOL DRIVE L 33613			
In accordan	: 86-1058304 FEI Number Applied For ce with s. 607.193(2)(b), F.S., the corporation I Address of Current Registered Age	n did not receive the prior notice.	Certificate of Status Desired ( ) s of New Registered Agent:	
TAMPA, F	PITOL DRIVE L 33613 US named entity submits this statement fo	or the purpose of changing its registe	ered office or registered agent, or both,	
in the State	e of Florida.			
SIGNATU				
	Electronic Signature of Register	ed Agent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	EXED ( ) Delete KAPLAN, LEVI A 14313 CAPITOL DRIVE TAMPA, FL 33613	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TRES ( ) Delete BRADT, DENNIS E 2104 SOUTH CURT CIRCLE TAMPA, FL 33629	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ( ) Delete BEASLEY, JAMI 3110 WREN LANE LAKELAND, FL 33860	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	OFFI ( ) Delete	Title:	( ) Change ( ) Addition	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: LEVI KAPLAN **EXED** 06/29/2005