## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 07, 2005 8:00 am Secretary of State

6/28/05 Date 7J 7-898-9011 Daytme Phone #

Suite, Apt. F. etc.  City & State  A. FEN Number 59-0747302  Zip  Country  6. Name and Address of Current Registered Agent  T. Name and Address of New Registered Agent  Name  LUDIN, ETIC  MEET 4-MENN P.A. P. P. P. P. L.	90003 010 ****61.25	
Suite, Apt. F. etc.  City & State  A. FEN Number 59-0747302  Zip  Country  6. Name and Address of Current Registered Agent  T. Name and Address of New Registered Agent  Name  LUDIN, ETIC  MEET 4-MENN P.A. P. P. P. P. L.	<b> </b>	
City & State  Country  S. Centificate of Status Desired   \$6. Name and Address of Current Registered Agent  T. Name and Address of New Registered Agent  T. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  FL  A. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am fet the obligations of registered agent, or both, in the State of Florida. I am fet the obligations of registered agent, or both, in the State of Florida. I am fet the obligations of registered agent, or both, in the State of Florida. I am fet the obligations of registered agent, or both, in the State of Florida. I am fet the obligations of registered agent, or both, in the State of Florida. I am fet the obligations of registered agent, or both, in the State of Florida. I am fet the obligations of registered agent, or both, in the State of Florida. I am fet the obligations of registered agent, or both, in the State of Florida. I am fet the obligations of registered agent, or both, in the State of Florida. I am fet the obligations of registered agent, or both, in the State of Florida. I am fet the obligations of registered agent, or both, in the State of Florida. I am fet the obligations of registered agent, or both, in the State of Florida. I am fet flori		
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6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent Agent 7. Name and Address of New Registered Agent Agent Registered Agent	Applied F Not Appli	
LUDIN, ERIC PHER & LUDIN, PA 5720 CENTRAL AVE. ST. PETERSBURG, FL 33707  8. The above named entily submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am fa the obligations of registered agent and the displacation.    SIGNATURE	\$9.75 Additional	
LUDIN, ERIC PPERS LUSIN, PA 5720 CENTRAL AVE. ST. PETERSBURG, FL 33707  Street Address (P.O. Box Number is Not Acceptable)  City FL  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 fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent are the registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent, or both, in the State of Florida. I am fe the obligations of registered agent ag	gistered Agent	
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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 fathe obligations of registered florida. I am father oblig	Zip Code	
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SIGNATURE    Signature. typed or printed rame of registered agent and set of applicable   (INCTE. Registered Agent Egnature required when reinstating)   DATE	ida. I am iamiliar with, and ac	cept
SIGNATURE    Signature. typed or printed rame of registered agent and set of applicable   (INCTE. Registered Agent Egnature required when reinstating)   DATE	29/05	
Due by September 7, 2005  Trust Fund Contribution.  Added to Fees  Florida Departs  10.7.  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRE  TITLE  WALLACE, MICHAEL  SIRRET ADDRESS  CITY-ST-2P  SAINT PETERSBURG, FL 33710  TITLE  NAME  SIRRET ADDRESS  CITY-ST-2P  SAINT PETERSBURG, FL 33715  TITLE  NAME  SIRRET ADDRESS  CITY-ST-2P  TO  MAKE  SIRRET ADDRES	DATE	-
10."F. OFFICERS AND DIRECTORS  TITLE F. NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33715  TITLE 1096 NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33715  TITLE 1096 NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33715  TITLE 1097 NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33715  TITLE 1097 NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33715  TITLE 1070 NAME STREET ADDRESS CITY-ST-2P CLEARWATER, FL 34624  TITLE 1070 NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33778  TITLE 1070 NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33778  TITLE 1070 NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33776  TITLE 1070 NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33776  TITLE 1070 Delete 1070 Delete 1070 SAINT PETERSBURG, FL 33776  1070 SAINT PETERSBURG, FL 33776  1070 SAINT PETERSBURG, FL 33776  TITLE 1070 NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33776  TITLE 1070 SAINT PETERSBURG, FL 33776  TITLE 1070 NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33776  TITLE 1070 NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33776  TITLE NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33777  TITLE NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33777  TITLE NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33777  TITLE NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33777  TITLE NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33777  TITLE NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33777  TITLE NAME STREET ADDRESS CITY-ST-2P SAINT PETERSBURG, FL 33707  TITLE SAINT PE	ike check payable to da Department of State	
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