

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2005 8:00 am
Secretary of State

01-31-2005 90064 018 ****61.25

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01152005 Chg-NP CR2E037 (10/03)

DOCUMENT # N94000005793					
1. Entity Name PROFNET OF VERO BEACH, INC.					
Principal Place of Business 1766 20TH AVENUE VERO BEACH, FL 32960			Mailing Address 1766 20TH AVENUE VERO BEACH, FL 32960		
2. Principal Place of Business 626 3rd Place		3. Mailing Address 626 3rd Place			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Vero Beach, FL		City & State Vero Beach, FL		4. FEI Number 59-3283760	
Zip 32962		Country Indian River		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent BEARD, RICHARD D 1766 20TH AVENUE VERO BEACH, FL 32960			7. Name and Address of New Registered Agent Name: Linda Rye Street Address (P.O. Box Number is Not Applicable) 90 626 3rd Place Vero Beach, FL 32962 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: <i>Linda Rye</i> (NOTE: Registered Agent signature required when reinstating) DATE: 1-25-05					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE PD	NAME SCHLITT, BOB JR	<input checked="" type="checkbox"/> Delete	TITLE Secretary	NAME Lourdes Wellhausen	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1717 INDIAN RIVER DRIVE, #302	CITY-ST-ZIP VERO BEACH, FL 32960		STREET ADDRESS 4101 S. Indian River DR	CITY-ST-ZIP FT. Pierce, FL 34982	
TITLE VPD	NAME BANOV, AMY	<input checked="" type="checkbox"/> Delete	TITLE Vice Pres.	NAME Kel LA Branch	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 2855 OCEAN DRIVE, #C-6	CITY-ST-ZIP VERO BEACH, FL 32966		STREET ADDRESS 1432 21st St, Suite Q	CITY-ST-ZIP VERO BEACH, FL 32962	
TITLE T	NAME WALKER, DIANA	<input checked="" type="checkbox"/> Delete	TITLE Treasurer	NAME Linda Rye	<input checked="" type="checkbox"/> Addition
STREET ADDRESS 958 20TH PLACE	CITY-ST-ZIP VERO BEACH, FL 32960		STREET ADDRESS 710 17th Ave	CITY-ST-ZIP VERO BEACH, FL 32962	
TITLE S	NAME WILLIAMS, VICKI L	<input checked="" type="checkbox"/> Delete	TITLE President	NAME Vicki L. Williams	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1676 20TH PLACE	CITY-ST-ZIP VERO BEACH, FL 32962		STREET ADDRESS 1676 20TH PLACE	CITY-ST-ZIP VERO BEACH, FL 32962	
TITLE D	NAME STEPHENS, MICHAEL	<input checked="" type="checkbox"/> Delete	TITLE PAST PRESIDENT	NAME Diana Walker	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 210 OLD DIXIE	CITY-ST-ZIP VERO BEACH, FL 32962		STREET ADDRESS 958 20th Place	CITY-ST-ZIP VERO BEACH, FL 32960	
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 617, 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: <i>Linda Rye</i>			1-25-05 772-559-5549		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		