


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000024227
 1. Entity Name
 ACCURATE FIGURES, INC.



Principal Place of Business Mailing Address
 5159 TAN ST. 5159 TAN ST.
 JACKSONVILLE, FL 32258 JACKSONVILLE, FL 32258

DO NOT WRITE IN THIS SPACE



04042005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 36-4352442 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 BREWER, GERALD C
 5159 TAN ST.
 JACKSONVILLE, FL 32258

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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 familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	BREWER, GERALD C
STREET ADDRESS	5159 TAN ST.
CITY - ST - ZIP	JACKSONVILLE, FL 32258
TITLE	VPS
NAME	BREWER, CAROLYN
STREET ADDRESS	5159 TAN ST.
CITY - ST - ZIP	JACKSONVILLE, FL 32258
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 04/05/05-80016-006 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Gerald C Brewer* 4-3-05 904 860-0469
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time Phone #