



# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90429 028 \*\*\*150.00

<b>DOCUMENT # P00000030885</b> 1. Entity Name <b>PANZER-YONGUE &amp; ASSOCIATES, INC.</b>					
Principal Place of Business <b>7990-2005 BAYMEADOWS RD E JACKSONVILLE, FL 32256</b>			Mailing Address <b>7990-2005 BAYMEADOWS RD E JACKSONVILLE, FL 32256</b>		
2. Principal Place of Business <b>10901 BURNT MILL ROAD Suite, Apt. #, etc. 2308</b>		3. Mailing Address <b>10901 BURNT MILL ROAD Suite, Apt. #, etc. 2308</b>			
City & State <b>JACKSONVILLE, FL</b>		City & State <b>JACKSONVILLE, FL</b>		4. FEI Number <b>59-3633746</b>	
Zip <b>32256</b>		Country <b>DUVAL</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>PANZER, KAREN 7990-2005 BAYMEADOWS RD E JACKSONVILLE, FL 32256</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>10901 BURNT MILL RD., #2308</b> City <b>JACKSONVILLE FL 32256</b>	
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 <u><i>Karen Panzer</i></u> <span style="float: right;">4/29/05</span> <small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when resigning)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PANZER, KAREN C</b> <b>7990-2005 BAYMEADOWS RD E</b> <b>JACKSONVILLE, FL 32256</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>10901 BURNT MILL RD., #2308</b> <b>JACKSONVILLE, FL 32256</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>YONGUE, KAREN</b> <b>37331 CODY CIRCLE I-2</b> <b>HILLIARD, FL 32046</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>KAREN WILLENBRECHT</b> <b>2790 SOUTH PERIWINKLE AVE.</b> <b>MIDDLEBURG, FL 32068</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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)(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: <u><i>Karen C. Panzer</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4/29/05 <small>Date Daytime Phone #</small>		