2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P00000043911

1. Entity Name
VERA M. KINGSBURY, P.A.

Principal Place of Business	Mailing Address
700 STARKEY ROAD, UNIT 1133 LARGO, FL 33771	700 STARKEY ROAD, UNIT 1133 LARGO, FL 33771

DO NOT WRITE IN THIS SPACE

01122005   No Chg-P   CR2E034 (10/03)

4. FEI Number 59-3644700	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WINN, J. MARVIN
131 FIRST STREET NW
LARGO, FL 33770

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (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 ☐   **$5.00** May Be
Trust Fund Contribution.   Added to Fees

10.	OFFICERS AND DIRECTORS
TITLE	DPS
NAME	KINGSBURY, VERA M
STREET ADDRESS	700 STARKEY ROAD, UNIT 1133
CITY-ST-ZIP	LARGO, FL 33771
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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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/12/05-80017-014 150.00

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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)(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: *Vera M. Kingsbury, P.A.*   *President*   727-584-0210   2/9/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #