## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000063024

Entity Name: GINA V. EATON, LCSW, P.A.

FILED Apr 10, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1840 MAIN ST., STE 104 WESTON, FL 33326 5400 S. UNIVERSITY DRIVE

**SUITE #207** DAVIE, FL 33328

**Current Mailing Address: New Mailing Address:** 

1840 MAIN ST., STE 104 WESTON, FL 33326 4848 GRAPEVINE WAY DAVIE, FL 33331

FEI Number: 65-1020045 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

EATON, GINA V EATON, GINA V 1840 MAIN ST., STE 104 WESTON, FL 33326 4848 GŔAPEVINE WAY DAVIE, FL 33331

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.

SIGNATURE: GINA V. EATON 04/10/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition ( ) Delete Title:

EATON, GINA V EATON, GINA V Name: Name: 1840 MAIN ST., STE 104 Address: 4848 GRAPEVINE WAY Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: **DAVIE, FL 33331** 

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GINA V. EATON PD 04/10/2005