2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 28, 2005 8:00 am Secretary of State

| DOCUMENT # P0000092755 1. Entity Name BARNARD JACK PRENNER, P.A. | | | | | 02-28-2005 90181 031 ***150.00 | | | | |
|--|---|--|-------------|--|--------------------------------|-----------------------|----------------|---------------------------|------------|
| Principal Plac | e of Business | Mailing Address | | |] | | | | |
| 2637 NE 28 COURT | | 2637 NE 28 COURT | | | | | | | |
| LIGHTHOUSE | POINT, FL 33064 | LIGHTHOUSE POINT, FL 33064 | | | | | | | |
| | | | | | | | | | |
| 2. Principal F | lace of Business | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 02142005 | Chg-P | CR2E034 | 1 (10/03) | | |
| City & State | | City & State | | 4. FEI Number 65-0215 | | | - | plied For t Applicable | |
| Zip | Country | Zip | Coun | try | 5. Certificate of | f Status Desired | | 8.75 Add | |
| | 6. Name and Address of Current I | Registered Agent | | | 7. Name and | Address of New R | legistered Ag | ent | |
| DOCUMED OF BUAND | | | Name | | | | | | |
| PRENNER, BARNARD J 2637 NE 28TH COURT LIGHTHOUSE POINT, FL 33064 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| LIGITITIO | 5021 0111,12 00001 | | | | | | | | |
| | | | City | FL Zip Code | | | | | |
| | named entity submits this statement for ions of registered agent. | the purpose of changing its | registere | ed office or registe | red agent, or both | , in the State of Flo | orida. I am fa | niliar with, | and accept |
| SIGNATURE. | • | | | | | | | | |
| | Signature, typed or printed name of registered agent a | and title if applicable. (NOTE | : Registere | d Agent signature require | d when reinstating) | | DATE | | |
| | E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0 | 9. Election Campai Trust Fund Conti | ~ | | .00 May Be ded to Fees | | | | |
| 10. | OFFICERS AND | DIRECTORS | 11. | | ADDITIONS/C | HANGES TO OFF | ICERS AND D | DIRECTORS | |
| TITLE | D BRENNER BARNARD I | ☐ Delete | TITLE | | | | 1 | ☐ Change | Addition |
| NAME STREET ADDRESS | | | NAM STRE | ET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | -ST-ZIP | | | | | |
| TITLE | ☐ Delete TITL | | | | | [| Change | Addition | |
| NAME | | | NAM | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | ET ADDRESS - ST-ZiP | | | | | |
| TITLE | | | TITLE | | | | | Change | Addition |
| NAME | 2000 | | NAM | | | | , | 5- | |
| STREET ADDRESS | | | | et addr <u>e</u> ss | | | | | |
| CITY - ST - ZIP | POMPANO BEACH, FL 33064 | | | -ST-ZIP | | | | | |
| TITLE NAME | ☐ Delete TITL NAM | | TITLE | | | | | Change | ☐ Addition |
| STREET ADDRESS | | | | ET ADDRESS | | | | | |
| CITY-ST-ZIP | ar | | CITY | -ST-ZIP | | | | | |
| TITLE | ☐ Delete TITL | | | | | | Change | Addition | |
| NAME | | | NAM | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | ET ADDRESS -ST-ZIP | | | | | |
| TITLE | | ☐ Delete | īm.i | | | | l | Change | Addition |
| NAME | | | NAM | | | | • | • | _ |
| STREET ADDRESS | | | | ET ADORESS -ST-ZIP | | | | | |
| CITY-ST-ZIP | 1 | | | | | | | | |

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: Bural Julier Signature and Typed on Printed Name Of Signing Officer on Director Dale Daying Printed Name Of Signing Officer on Director