

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000002368

FILED
Apr 29, 2005
Secretary of State

Entity Name: FALCON RIVER ASSOCIATES, INC.

Current Principal Place of Business:

8540 NORTH SHERMAN CIR.
APT. 103
MIRAMAR, FL 33025

New Principal Place of Business:

Current Mailing Address:

8540 NORTH SHERMAN CIR.
APT. 103
MIRAMAR, FL 33025

New Mailing Address:

P.O BOX 246225
HOLLYWOOD, FL 33024

FEI Number: 20-1152272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22 STREET 4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BROWN, PAUL
Address: 8540 NORTH SHERMAN CIR., APT. 103
City-St-Zip: MIRAMAR, FL 33025

Title: VD () Delete
Name: BROWN, SHARMEN
Address: 8540 NORTH SHERMAN CIR., APT. 103
City-St-Zip: MIRAMAR, FL 33025

Title: VD () Delete
Name: MCDONALD, EDITH
Address: 8540 NORTH SHERMAN CIR., APT. 103
City-St-Zip: MIRAMAR, FL 33025

Title: V () Delete
Name: ELCOCK, JAMIE
Address: 8540 NORTH SHERMAN CIR., APT. 103
City-St-Zip: MIRAMAR, FL 33025

Title: ST () Delete
Name: BROWN, TANYA
Address: 8540 NORTH SHERMAN CIR., APT. 103
City-St-Zip: MIRAMAR, FL 33025

Title: V () Delete
Name: BROWN, STEPHEN A
Address: 8540 NORTH SHERMAN CIR., APT. 103
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 Statutes. 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: PAUL BROWN

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date