

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000003291

Entity Name: CAROL LARMORE, P.A.

FILED
Jan 10, 2005
Secretary of State

Current Principal Place of Business:

144 LANTANA AVE
FLAGLER BCH, FL 32136

New Principal Place of Business:

511 NORTH OCEANSHORE BLVD
FLAGLER BCH, FL 32136

Current Mailing Address:

144 LANTANA AVE
FLAGLER BCH, FL 32136

New Mailing Address:

P.O. BOX 1289
FLAGLER BCH, FL 32136

FEI Number: 59-3666744

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARMORE, CAROLYN R
144 LANTANA AVE
FLAGLER BCH, FL 32136 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: D () Delete
Name: LARMORE, CAROLYN
Address: 144 LANTANA AVE
City-St-Zip: FLAGLER BCH, FL 32136

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CAROL LARMORE

D

01/10/2005

Electronic Signature of Signing Officer or Director

_____ Date