

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000004852

Entity Name: SIMSES & ASSOCIATES, P.A.

FILED
Feb 24, 2005
Secretary of State

Current Principal Place of Business:

140 ROYAL PALM WAY, STE 205
PALM BEACH, FL 33480

New Principal Place of Business:

400 ROYAL PALM WAY
SUITE 304
PALM BEACH, FL 33480

Current Mailing Address:

140 ROYAL PALM WAY, STE 205
PALM BEACH, FL 33480

New Mailing Address:

400 ROYAL PALM WAY
SUITE 304
PALM BEACH, FL 33480

FEI Number: 65-1064676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMSES, ROBERT G
140 ROYAL PALM WAY, STE 205
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

SIMSES, ROBERT G
400 ROYAL PALM WAY
SUITE 304
PALM BEACH, FL 33480 US

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:

02/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SIMSES, ROBERT G
Address: 140 ROYAL PALM WAY, STE 205
City-St-Zip: PALM BEACH, FL 33480

Title: DS () Delete
Name: SIMSES, MARY
Address: 140 ROYAL PALM WAY, STE 205
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SIMSES, ROBERT G
Address: 400 ROYAL PALM WAY, SUITE 304
City-St-Zip: PALM BEACH, FL 33480

Title: DS (X) Change () Addition
Name: SIMSES, MARY
Address: 400 ROYAL PALM WAY, SUITE 304
City-St-Zip: PALM BEACH, FL 33480

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: ROBERT G. SIMSES

D

02/24/2005

Electronic Signature of Signing Officer or Director

Date