2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000020750

Entity Name: CAMERLENGO & DRIVER, P.A.

FILED Apr 25, 2005 Secretary of State

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

4741 ATLANTIC BLVD., SUITE D 644 CESERY BOULEVARD JACKSONVILLE, FL 32207

SUITE 300

JACKSONVILLE, FL 32211 US

Current Mailing Address: New Mailing Address:

4741 ATLANTIC BLVD., SUITE D 644 CESERY BOULEVARD JACKSONVILLE, FL 32207

SUITE 300

JACKSONVILLE, FL 32211 US

ONE INDEPENDENT DRIVE

INTREPID REGISTERED AGENT SERVICES, LLC

FEI Number: 59-3700004 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

INTREPID REGISTERED AGENT SERVICES, LLC 225 WATER STREET, SUITE 2020

JACKSONVILLE, FL 32202 SUITE 1200 JACKSONVILLE, FL 32202 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: GWEN HUTCHESON GRIGGS, EVP 04/25/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition Name: CAMERLENGO, JOSEPH V Name: CAMERLENGO, JOSEPH V 4741 ATLANTIC BLVD STE D 644 CESERY BOULEVARD, SUITE 300 Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: JACKSONVILLE, FL 32211 US

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

DRIVER, JR., G. RAY DRIVER, GARY R JR. Name: Name:

225 WATER STREET, SUITE 2020 ONE INDEPENDENT DRIVE, SUITE 1200 Address: Address:

JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 US City-St-Zip: City-St-Zip:

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

MCAFEE, MATTHEW S Name: Name:

ONE INDEPENDENT DRIVE, SUITE 1200 Address Address:

City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32202 US

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: G. RAY DRIVER, JR. ٧ 04/25/2005