

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000028457

FILED
Mar 09, 2005
Secretary of State

Entity Name: KATHERINE H. OLSON, P.A.

Current Principal Place of Business:

3266 RED BLUSH WAY
NAPLES, FL 34120

New Principal Place of Business:

3332 MYSTIC RIVER DRIVE
NAPLES, FL 34120

Current Mailing Address:

3266 RED BLUSH WAY
NAPLES, FL 34120

New Mailing Address:

3332 MYSTIC RIVE DRIVE
NAPLES, FL 34120

FEI Number: 65-1089846

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLSON, KATHERINE H
3266 RED BLUSH WAY
NAPLES, FL 34120 US

Name and Address of New Registered Agent:

OLSON, KATHERINE H
3332 MYSTIC RIVER DRIVE
NAPLES, FL 34120 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: KATHERINE H. OLSON

03/09/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OLSON, KATHERINE H
Address: 3266 RED BLUSH WAY
City-St-Zip: NAPLES, FL 34120

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: OLSON, KATHERINE H
Address: 3332 MYSTIC RIVER DRIVE
City-St-Zip: NAPLES, FL 34120

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: KATHERINE H. OLSON

D

03/09/2005

Electronic Signature of Signing Officer or Director

Date