2005 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like

SIGNATURE:

Apr 27, 2005 08:00 AM DOCUMENT # P01000041392 **Secretary of State** CYNTHIA LEE BOYD, P.A. Principal Place of Business Mailing Address 6756 EAGLE STREET FORT MYERS, FL 33912 6766 EAGLE ST. FORT MYERS, FL 33912 US 04222005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1098827 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BOYD, CYNTHIA R 6756 EAGLE STREET FORT MYERS, FL 33912 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and fille if applicable. (NOTE: Registered Agent signature required which reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 **\$5.00** May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PISD TITLE BOYD, CYNTHIA LEE NAME 6756 EAGLE ST. STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33912 U00000334383 TITLE 27/05-80042-008 150.00 NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes, I further cert indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that far of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in

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