2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000083422

Entity Name: STEPHEN K. BROCK, P.A.

FILED Jan 17, 2005 Secretary of State

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

1055 GOLF POINT LOOP 995 N S.R. 434 APOPKA, FL 32712 SUITE 307

ALTAMONTE SPRINGS, FL 32714

Current Mailing Address: New Mailing Address:

995 N. S.R. 434 SUITE 307 1055 GOLF POINT LOOP

APOPKA, FL 32712

ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-3738754 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:

BROCK, STEPHEN K BROCK, STEPHEN K P.A. 1055 GÓLF POINT LOOP 632 SUN BLUFF LANE APOPKA, FL 32712 APOPKA, FL 32712

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: STEPHEN K, BROCK 01/17/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

BROCK, STEPHEN K BROCK, STEPHEN K P.A. Name: Name: 1055 GOLF POINT LOOP 632 SUN BLUFF LANE Address: Address: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712 City-St-Zip:

VΡ Title: VΡ (X) Change () Addition Title: () Delete Name: BROCK, MICHELLE R Name: BROCK, MICHELLE R

1055 GOLF POINT LOOP 632 SUN BLUFF LANE Address: Address: APOPKA, FL 32712 APOPKA, FL 32712 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition BROCK, STEPHEN BROCK, STEPHEN K P.A. Name: Name:

1055 GOLF POINT LOOP 632 SUN BLUFF LANE Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712

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

BROCK, STEPHEN K BROCK, STEPHEN K P.A. Name: Name: Address: 1055 GOLF POINT LOOP Address: 632 SUN BLUFF LANE City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712

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: MICHELLE BROCK V.P. 01/17/2005