## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000085981

Entity Name: WOLFE, YOUNG & COMPANY, INC.

FILED Jan 21, 2005 Secretary of State

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

5100 HWY 17-92 STE 200 1515 INTERNATIONAL PARKWAY CASSELBERRY, FL 32707

SUITE 1001

LAKE MARY, FL 32746

**Current Mailing Address: New Mailing Address:** 

5100 HWY 17-92 STE 200 1515 INTERNATIONAL PARKWAY

SUITE 1001 CASSELBERRY, FL 32707

LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 59-3749977 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

YOUNG, LONNIE YOUNG, LONNIE 5100 HWY 17-92 STE 200 1515 INTERNATIONAL PARKWAY CASSELBERRY, FL 32707 US

SUITE 1001 LAKE MARY, FL 32746 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: 01/21/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

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

YOUNG, LONNIE Name: Name: YOUNG, LONNIE 5100 HWY 17-92 STE 200 1515 INTERNATIONAL PARKWAY, #1001 Address: Address:

City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: LAKE MARY, FL 32746

Title: DV Title: DV (X) Change ( ) Addition () Delete Name: WOLFE, ROBERT Name: WOLFE, ROBERT

5100 HWY 17-92 STE 200 Address: 1515 INTERNATIONAL PARKWAY, #1001 Address:

CASSELBERRY, FL 32707 LAKE MARY, FL 32746 City-St-Zip: City-St-Zip:

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 W. WOLFE DV 01/21/2005