

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000088856

FILED
Feb 04, 2005
Secretary of State

Entity Name: AMA TRANSITIONS AND MARKETING, INC.

Current Principal Place of Business:

2435 US HIGHWAY 19
SUITE 220
HOLIDAY, FL 34691

New Principal Place of Business:

Current Mailing Address:

4615 FORT SHAW DRIVE
NEW PORT RICHEY, FL 34655

New Mailing Address:

2435 US HIGHWAY 19
SUITE 220
HOLIDAY, FL 34691

FEI Number: 59-3736023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, ANTHONY R
4615 FORT SHAW DRIVE
NEW PORT RICHEY, FL 34655 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWN, ANTHONY R
Address: 4615 FORT SHAW DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BROWN, HEATHER L
Address: 4615 FORT SHAW DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D () Change (X) Addition
Name: BROWN, ANTHONY R
Address: 4615 FORT SHAW DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

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: ANTHONY R BROWN

D

02/04/2005

Electronic Signature of Signing Officer or Director

Date