2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P01000110880

1. Entity Name
DEBBY DUENOW, P.A.

Principal Place of Business	Mailing Address
3505 US 1 SOUTH ST AUGUSTINE, FL 32086	3505 US 1 SOUTH ST AUGUSTINE, FL 32086

DO NOT WRITE IN THIS SPACE

04202005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
30-0019912	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DUENOW, DEBBY
3505 US 1 SOUTH
ST AUGUSTINE, FL 32086

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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 title if applicable.   (NOTE. Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2005 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	DUENOW, DEBBY
STREET ADDRESS	3505 US 1 SOUTH
CITY-ST-ZIP	ST AUGUSTINE, FL 32086

TITLE	
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05/05/05-80031-002 150.00

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Debby Duenow_   4/27/05   (904)669-028

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #