

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 25, 2005 08:00 AM
Secretary of State**

DOCUMENT # P01000115682

1. Entity Name
ERDMAN I, INC.



Principal Place of Business
**3645 BONITA BEACH ROAD
SUITE 4
BONITA SPRINGS, FL 34134**

Mailing Address
**3645 BONITA BEACH ROAD
SUITE 4
BONITA SPRINGS, FL 34134**



03142005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FCI Number
03-0374849

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ERDMAN, GREGORY A
3645 BONITA BEACH ROAD
SUITE 4
BONITA SPRINGS, FL 34134**

**DO NOT WRITE
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 title, if applicable

(NOTE: Registered Agent signature required when retaking)

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
NAME
STREET ADDRESS
CITY ST ZIP
**P
ERDMAN, CHARLES J JR.
3645 BONITA BEACH ROAD, SUITE 4
BONITA SPRINGS, FL 34134**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

**DO NOT WRITE
IN THIS SPACE**

U00000326810

04/25/05-80013-005 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Charles J. Erdman Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-05

Date

(239) 992-8837

Day or Phone #