# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 24, 2005**
**Secretary of State**

DOCUMENT# P01000116095

**Entity Name:** FITZNELSON, INC.

**Current Principal Place of Business:**

53 W. COLONIAL DRIVE
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

53 W. COLONIAL DRIVE
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number: 59-3759007** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

MALONE, J. MICHAEL
53 W. COLONIAL DRIVE
ORLANDO, FL 32801 US

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

MALONE, J. MICHAEL
523 W COLONIAL DR
ORLANDO, FL 32804 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: _____ 05/24/2005
Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete
Name: NELSON, CHERYL F
Address: 613 DANIELS AVE
City-St-Zip: ORLANDO, FL 328014030

Title: VPT ( ) Delete
Name: NELSON, DAVID R
Address: 613 DANIELS AVE
City-St-Zip: ORLANDO, FL 328014030

Title: DTR ( ) Delete
Name: NELSON, RICHARD L
Address: 2415 MISCINDY PL
City-St-Zip: ORLANDO, FL 32806

Title: DTR ( ) Delete
Name: NELSON, SHIRLEY B
Address: 2415 MISCINDY PL
City-St-Zip: ORLANDO, FL 32806

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: DAVID R. NELSON VPT 05/24/2005
Electronic Signature of Signing Officer or Director — Date