

MAR-14-2005 MON 10:48 AM GILMAN & PASTOR
NEWBORG & COMPANY

FAX NO. 239 213 9946
FAX No. 7812390914

P. 01

FILED

Mar 22, 2005 08:00 AM
Secretary of State

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000117335 1. Entity Name KENNETH G. GILMAN, P.A.	
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Principal Place of Business 5150 NORTH TAMiami TRAIL SUITE 602 NAPLES, FL 34103	Mailing Address 57 RIVER ST SUITE 102 WELLESLEY HILLS, MA 02481
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03112005 No Chg-P CR2E034 (10/03)

4. FEI Number 22-3851013	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CLASP INC. 3001 TAMiami TR N, 4TH FLOOR NAPLES, FL 34103
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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 this if applicable. (NOTE: Registered Agent's signature required when reappointing)

U00000272624

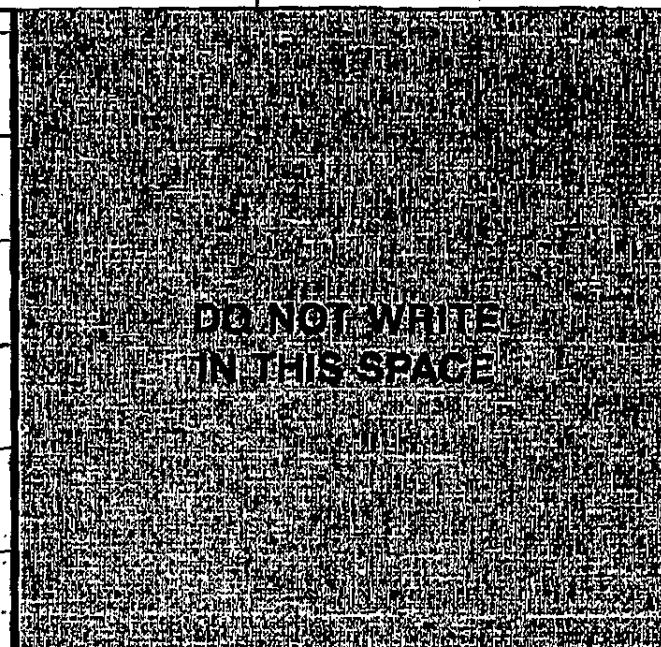
13/22/05-80013-017 150.00

DATE

**FILE NOW!! FEE IS \$150.00
After May 1, 2005 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

TO: OFFICERS AND DIRECTORS	
TITLE	D
NAME	GILMAN, KENNETH G
STREET ADDRESS	5150 NORTH TAMiami TRAIL STE #602
CITY-ST-ZIP	NAPLES, FL 34103
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	



12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(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 amendments, when it does not appear.

SIGNATURE:  3/11/2005
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNER'S OFFICER OR DIRECTOR