

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000025275

**FILED**  
**Jan 07, 2005**  
**Secretary of State**

**Entity Name:** LAROCQUE & COMPANY REALTORS, INC.

**Current Principal Place of Business:**

495 BELLA CAPRI DR  
MERRITT ISLAND, FL 32952

**New Principal Place of Business:**

640 BREVARD AVE  
102  
COCOA, FL 32922

**Current Mailing Address:**

495 BELLA CAPRI DR  
MERRITT ISLAND, FL 32952

**New Mailing Address:**

640 BREVARD AVE  
102  
COCOA, FL 32922

FEI Number: 75-3026164

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAROCQUE, PENELOPE C  
495 BELLA CAPRI DR  
MERRITT ISLAND, FL 32952 US

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

LAROCQUE, MICHAEL P  
865 HONEYSUCKLE DRIVE  
COCOA, FL 32955 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: MICHAEL P LAROCQUE

01/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: LAROCQUE, PENELOPE  
Address: 495 BELLA CAPRI DR  
City-St-Zip: MERRITT ISLAND, FL 32952

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

Title: DP (X) Change ( ) Addition  
Name: LAROCQUE, MICHAEL P  
Address: 865 HONEYSUCKLE DRIVE  
City-St-Zip: COCOA, FL 32955

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: MICHAEL P LAROCQUE

MR

01/07/2005

Electronic Signature of Signing Officer or Director

Date