

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000032996

FILED
Jan 16, 2005
Secretary of State

Entity Name: LEGAL DOC. PREPARATION SECRETARIAL SERVICES, INC.

Current Principal Place of Business:

1041 ARIZONA AVE
FT LAUDERDALE, FL 33312

New Principal Place of Business:

4330 W. BROWARD BLVD STE-E
FT LAUDERDALE, FL 33317

Current Mailing Address:

1041 ARIZONA AVE
FT LAUDERDALE, FL 33312

New Mailing Address:

4330 WEST BROWARD BLVD STE-E
FT LAUDERDALE, FL 33317

FEI Number: 75-3036419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CAMPBELL, MONICA F
1041 ARIZONA AVE
FT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

CAMPBELL, MONICA F
4330 WEST BROWARD BLVD STE-E
FT LAUDERDALE, FL 33317 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: MONICA F. CAMPBELL

01/16/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CAMPBELL, MONICA F
Address: 1041 ARIZONA AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: DV () Delete
Name: CAMPBELL, LEROY A
Address: 1041 ARIZONA AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: S () Delete
Name: SMITH, LINDA A
Address: 3110 HOUSTON ST
City-St-Zip: FT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CAMPBELL, MONICA F
Address: 3110 HOUSTON STREET
City-St-Zip: FT LAUDERDALE, FL 33312

Title: DV (X) Change () Addition
Name: CAMPBELL, LEROY A
Address: 3110 HOUSTON STREET
City-St-Zip: FT LAUDERDALE, FL 33312

Title: S (X) Change () Addition
Name: SMITH, LINDA A
Address: 840 WYOMING AVE
City-St-Zip: FT LAUDERDALE, FL 33312

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: MONICA F. CAMPBELL

DP

01/16/2005

Electronic Signature of Signing Officer or Director

Date