

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000035070

**FILED**  
**Apr 15, 2005**  
**Secretary of State**

**Entity Name:** HOLBENS ON CENTRAL INC.

**Current Principal Place of Business:**

404 MARTIN LUTHER KING  
STE C-11&12  
MADISON, FL 32340

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 548  
LEE, FL 32059

**New Mailing Address:**

FEI Number: 02-0582212

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOLBEN, JAMES L  
1841 HOLLENBECK DR  
ORLANDO, FL 32806 US

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

HOLBEN, JAMES L  
1309 E BASE ST  
MADISON, FL 32340 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/15/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HOLBEN, JAMES L  
Address: PO BOX 548  
City-St-Zip: LEE, FL 32059

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

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: JAMES L HOLBEN

Electronic Signature of Signing Officer or Director

P

04/15/2005

Date