## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 18, 2005 08:00 AM Secretary of State **DOCUMENT # P02000043509** 1. Entity Name SCOTT RENICK, P.A. Principal Place of Business Mailing Address 2109 SUEHAVEN DR 2109 SUEHAVEN DR ORLANDO, FL 32806 ORLANDO, FL 32806 04062005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 04-3641943 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent RENICK, SCOTT DO NOT WRITE 2109 SUEHAVEN DR ORLANDO, FL 32806 IN THIS SPACE 2005年度,1950年,1980年,1980年度 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 title if applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PST TITLE RENICK, SCOTT NAME 2109 SUEHAVEN DR STREET ADDRESS ORLANDO, FL 32806 CITY-ST-ZIP TITLE NAME 04/18/05-80096-019 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE 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(3)(i), 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 Teceiver 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 attachnoor with an address, with all other like empowered.

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED