

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000049629

FILED
Apr 20, 2005
Secretary of State

Entity Name: KATHERINE GOODMAN, P.A.

Current Principal Place of Business:

6 OAKWOOD DRIVE
SEAWALL'S POINT, FL 34996

New Principal Place of Business:

6 OAKWOOD DRIVE
SEAWALL'S POINT, FL 34996

Current Mailing Address:

6 OAKWOOD DRIVE
SEAWALL'S POINT, FL 34996

New Mailing Address:

6 OAKWOOD DRIVE
SEAWALL'S POINT, FL 34996

FEI Number: 22-3856506

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODMAN, KATHERINE C
6 OAKWOOD DRIVE
SEAWALL'S POINT, FL 34996 US

Name and Address of New Registered Agent:

GOODMAN, KATHERINE C
6 OAKWOOD DRIVE
SEAWALL'S POINT, FL 34996 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

04/20/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOODMAN, KATHERINE C
Address: 6 OAKWOOD DRIVE
City-St-Zip: SEAWALL'S POINT, FL 34996

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GOODMAN, KATHERINE C
Address: 6 OAKWOOD DRIVE
City-St-Zip: SEAWALL'S POINT, FL 34996

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: KATHERINE C. GOODMAN

D

04/20/2005

Electronic Signature of Signing Officer or Director

Date