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2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2005 8:00 am
Secretary of State
03-31-2005 90046 016 ***150.00

DOCUMENT # P02000066808

1. Entity Name
STATEWIDE PRIVATE GROUP, INC.

Principal Place of Business	Mailing Address
2560 ENTERPRISE RD. EAST CLEARWATER, FL 33759	2560 ENTERPRISE RD. EAST CLEARWATER, FL 33759

03252005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
2631 MC CORMICK DR	2631 MC CORMICK DR
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CLEARWATER, FL	City & State: CLEARWATER, FL
Zip: 33759 Country: PINELLAS	Zip: 33759 Country: PINELLAS

4. FEI Number 49-0500889 ☐ Applied For ☐ Not Applicab

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KENNEDY, BRIAN J
2560 ENTERPRISE RD. EAST
CLEARWATER, FL 33759

7. Name and Address of New Registered Agent

Name: KENNEDY, BRIAN J.
Street Address (P.O. Box Number is Not Acceptable): 2631 MC CORMICK DR.
City: CLEARWATER FL Zip Code: 33759

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) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENNEDY, BRIAN J 2560 ENTERPRISE RD. EAST CLEARWATER, FL 33759 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	KENNEDY, BRIAN J. 2631 MC CORMICK DR SUITE 102 CLEARWATER, FL 33759 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARVIN, TIM 209 140 AVE B SAINT PETERSBURG, FL 33708 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARVIN, TIM 2631 MC CORMICK DR SUITE 102 CLEARWATER, FL 33759 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 receiver 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 attachment with an address, with all other like empowered.

SIGNATURE: TIM MARVIN 3/28/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #