

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000088347

Entity Name: O'ROURKE LAW FIRM, P.A.

FILED  
Jan 13, 2005  
Secretary of State

**Current Principal Place of Business:**

4805 W LAUREL ST STE 230  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

4805 W LAUREL ST STE 230  
TAMPA, FL 33607

**New Mailing Address:**

FEI Number: 51-0422394

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

O'ROURKE, COLLEEN  
4805 W LAUREL ST STE 230  
TAMPA, FL 33607 US

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

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

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PDS ( ) Delete  
Name: ROURKE, COLLEEN O  
Address: 4805 W LAUREL ST STE 230  
City-St-Zip: TAMPA, FL 33607

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

Title: PDS (X) Change ( ) Addition  
Name: O'ROURKE, COLLEEN  
Address: 4805 W LAUREL ST STE 230  
City-St-Zip: TAMPA, FL 33607

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: COLLEEN O'ROURKE

PDS

01/13/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date