## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPEDOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED Jan 10, 2005 08:00 A Secretary of State

Daytima Phone #

	ANNUAL	EPURI		Jan 10, 2005 00.0
1. Entity Nar	MENT # P0200009367  ANC CORPORATION	15		Secretary of S
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		3535 GALT OCEAN DRIVE		
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			CE	4. FEI Number Applied For
				46-0500821 Not Applicable
ļ				\$9.75 Additional
			dj Toj. 1. 📆 🗸	5. Certificate of Status Desired Fee Required
	6. Name and Address of Current Regi	stered Agent		
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HUTCHINSON, LIAM 3535 GALT OCEAN DRIVE			`	DO NOT WRITE
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8. The above the obliga	e named entity submits this statement for the tions of registered agent.	purpose of changing its registere	ed office or register	red agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating)  DATE				
	Signature typed or printed hame or registered agent and title	o it applicable (NOTE, Registered	s Agent aignature required	when reinstating) DATE
FILE NOWILL FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financi  Trust Fund Contribution.				.00 May Be ed to Fees
10.	OFFICERS AND DIRE	CTORS		
TITLE	P			
NAME	HUTCHINSON, LIAM			1900001 72227
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CITY-ST-ZIP	certify that the information supplied with this contribution on this report or suppliemental report is true	illing does not qualify for the exen		
12. I hereby of indicated of the cor	certify that the information supplied with this firm this report or supplemental report is true poration or the receiver of rustee empowers or on an attachment with an address, with a	d to execute this report as require	nption stated in Sec are shall have the s	ction 119.07(3)(i), Florida Statutes, I further certify that the information name legal effect as if made under oath, that I am an officer or director, Florida Statutes; and that my name appears in Block 10 or Block 11 if