## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000101561

Entity Name: MICHELLE OCHRAN, P.A.

FILED Apr 24, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

103 SEBRING CIR 9360 ALAMANDER CT

LEHIGH ACRES, FL 33972 504

FORT MYERS, FL 33919

**Current Mailing Address: New Mailing Address:** 

9360 ALAMANDER CT 103 SEBRING CIR LEHIGH ACRES, FL 33972 504

FORT MYERS, FL 33919

FEI Number: 35-2180623 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

OCHRAN, MICHELLE OCHRAN, MICHELLE 103 SEBRING CIR 9360 ALAMANDER CT

LEHIGH ACRES, FL 33972 US 504 FORT MYERS, FL 33919 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: 04/24/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

OCHRAN, MICHELLE OCHRAN, MICHELLE Name: Name: 103 SEBRING CIR Address: 9360 ALAMANDER CT #504 Address: City-St-Zip: LEHIGH ACRES, FL 33972 City-St-Zip: FORT MYERS, FL 33919

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 Statutés. 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: MICHELLE OCHRAN 04/24/2005 D