## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED								
Mar 21, 2005	08:00 AM							
Secretary of	of State							

1. Entity Nan		P02000101 ERS, INC.	594			Sec	cretary o	i State
2046 CHER	ce of Business OKEE DRIVE EACH, FL 32266	US	. Mailing Address 2046 CHEROKEE DRIVE NEPTUNE BEACH, FL 32266	US		## <b>8</b> ###    <b>  </b> ## <b>8#</b> ## <b>8</b> ### <b>8#</b>		
Ω	•		IN THIS SPA	CE	03162005 4. FEi Numb 04-371	No Chg-P	CR2E034 (10/0	Applied For Not Applicable Additional
6. Name and Address of Current Registered Agent  ABBEY, GARY A 2046 CHEROKEE DRIVE NEPTUNE BEACH, FL 32266				DO NOT WRITE IN THIS SPACE				
the obligat	itions of registered a	nits this statement for gent.	the purpose of changing its register  - Inditie if applicable (NOTE Register.	red office or register		oth, in the State of Fig	orida. I am familiar wi	th, and accept
Fil. After M	E NOW!!! FEE		9. Election Campaign Fina	ncing _ <b>\$5.</b>	.00 May Be ed to Fees			
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME	P ABBEY, GARY 2046 CHEROKE NEPTUNE BEA TREA ABBEY, LORET 2046 CHEROKE NEPTUNE BEA	EE DRIVE CH, FL 32266 TA C EE DRIVE	VIRECTORS .	- -			9279723 -80017009 :	150.00
STREET ADDRESS GITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP						NOT W THIS SF		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		· · · · · · · · · · · · · · · · · · ·						

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:** 

NAME STREET ADDRESS CITY-ST-ZIP

> LORETTA
> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR LORETTA C. ABBEY

904-247-1733

Daytime Phone #