

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000115049

Entity Name: PAUL CZAP, P.A.

FILED  
Jul 07, 2005  
Secretary of State

## Current Principal Place of Business:

801 W BLOOMINGDALE AVE  
BRANDON, FL 33511

## New Principal Place of Business:

## Current Mailing Address:

801 W BLOOMINGDALE AVE  
BRANDON, FL 33511

## New Mailing Address:

2126 ACADIA GREENS DR  
SUN CITY CENTER, FL 33573

FEI Number: 59-3478830

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REEDY, MIKE CPA  
305 N. PARSONS AVE  
BRANDON, FL 33511 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: D ( ) Delete  
Name: CZAP, PAUL  
Address: 222 SCISSORTAIL TRAIL  
City-St-Zip: GEORGETOWN, TX 78628

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: CZAP, PAUL  
Address: 2126 ACADIA GREENS DR  
City-St-Zip: SUN CITY CENTER, FL 33573

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: PAUL CZAP

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

PRES

07/07/2005

\_\_\_\_\_  
Date