2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 28, 2005 08:00 AM Secretary of State

NAME STREET ADDRESS CITY-ST-ZIP GREENACRES, FL 33463 CITY-ST-ZIP GREENACRES, FL 33463 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		ANNUA				3	7.30	CCI CLZ	HV U	ı Duau
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Sule. Apt #, etc. O1112005 Chg-P CR2E034 (10/03) Not Application of Status Desired Application of Status Desired Sa.75 Additional Fee Required So. Name and Address of Current Registered Agent Name Status Desired Sa.75 Additional Fee Required Sule. Application of Status Desired Sa.75 Additional Fee Required Sa.75 Additional Fee Required FOX. TIMOTHY A FOX Street Address (P O. Box Number is Not Acceptable) Street Address (P O. Box Number is Not Acceptable) City FL Zip Code a. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fonda. I am familiar with, and acceptable City FL Zip Code a. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fonda. I am familiar with, and acceptable Signature pass to entitle pass to entitle agent automate agent	% TIMOTHY A. FOX 6020 LAKE WORTH ROAD		% TIMOTHY A. FOX 6020 LAKE WORTH	ROAD						
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