

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000014217

Entity Name: THOMAS BUTLER, PA

FILED  
Apr 27, 2005  
Secretary of State

**Current Principal Place of Business:**

1401 NW 17TH AVE  
MIAMI, FL 33125 US

**New Principal Place of Business:**

407 LINCOLN ROAD  
SUITE 708  
MIAMI BEACH, FL 33139 US

**Current Mailing Address:**

1401 NW 17TH AVE  
MIAMI, FL 33125 US

**New Mailing Address:**

407 LINCOLN ROAD  
SUITE 708  
MIAMI BEACH, FL 3313 US

FEI Number: 20-0289861

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHULTE, GREG  
13400 SW 82 STREET  
MIAMI, FL 33183 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: MR. ( ) Delete  
Name: BUTLER, THOMAS J MR.  
Address: 1000 WEST AVENUE, SUITE 1414  
City-St-Zip: MIAMI BEACH, FL 33139 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MR. (X) Change ( ) Addition  
Name: BUTLER, THOMAS J MR.  
Address: 407 LINCOLN ROAD, STE. 708  
City-St-Zip: MIAMI BEACH, FL 33139 US

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: THOMAS BUTLER

OFF

04/27/2005

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

\_\_\_\_\_ Date