


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005 8:00 am
Secretary of State

04-21-2005 90249 043 ***150.00

DOCUMENT # P03000033336			
1. Entity Name ERICAIRE BOOKS, INC.			
Principal Place of Business 103 N. OCEANAIRE TERRACE ORMOND BEACH, FL 32176		Mailing Address 103 N. OCEANAIRE TERRACE ORMOND BEACH, FL 32176	
2. Principal Place of Business		3. Mailing Address	
ERIC J PHILLIPS JR 1235 RADISON AVE SUN CITY CTR FL 33573-8022		ERIC J PHILLIPS JR 1235 RADISON AVE SUN CITY CTR FL 33573-8022	
4. FEI Number 65-1178867		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
PHILLIP, ERIC J JR 103 N. OCEANAIRE TERRACE ORMOND BEACH, FL 32176		Name ERIC J PHILLIPS JR Street 1235 RADISON AVE SUN CITY CTR FL 33573-8022 City FL Zip Code	
B. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PHILLIP, ERIC J JR 103 N. OCEANAIRE TERRACE ORMOND BEACH, FL 32176 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ERIC J PHILLIPS JR 1235 RADISON AVE SUN CITY CTR FL 33573-8022 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <u>PHILLIPS ERIC J. JR Eric J Phillips</u>		Date: <u>4-18-05</u> Daytime Phone #: <u>813-633-2383</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	

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