2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000038447

Entity Name: KAREN HARKNESS, P.A.

FILED Feb 23, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3747 INDIAN RIVER DR 96 WILLARD STREET, SUITE 106

COCOA, FL 32926 COCOA, FL 32922 US

Current Mailing Address: New Mailing Address:

3747 INDIAN RIVER DR 460 JILLOTUS STREET

COCOA, FL 32926 MERRITT ISLAND, FL 32952 US

FEI Number: 13-4250425 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HARKNESS, KAREN
3747 INDIAN RIVER DR
COCOA, FL 32926 US
HARKNESS, KAREN
96 WILLARD STREET
COCOA, FL 32922 US

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: KAREN S. HARKNESS 02/23/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS () Delete Title: DPS (X) Change () Addition

Name: HARKNESS, KAREN Name: HARKNESS, KAREN

Address: 3747 INDIAN RIVER DR Address: 96 WILLARD STREET, SUITE 106

City-St-Zip: COCOA, FL 32926 City-St-Zip: COCOA, FL 32922 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: KAREN S. HARKNESS DPS 02/23/2005