

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000041309

Entity Name: PATTI WALSH, INC.

FILED
Mar 24, 2005
Secretary of State

Current Principal Place of Business:

845 NIEMEN DRIVE
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

5101 MAGNOLIA BAY CIRCLE
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

845 NIEMEN DRIVE
PALM BEACH GARDENS, FL 33410

New Mailing Address:

5101 MAGNOLIA BAY CIRCLE
PALM BEACH GARDENS, FL 33418

FEI Number: 05-0571447

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALSH, PATTI
609 HUDSON BAY DRIVE
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

WALSH, PATTI
5101 MAGNOLIA BAY CIRCLE
PALM BEACH GARDENS, FL 33418 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:

03/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: WALSH, JANE
Address: 18 E SQUARE DRIVE #2
City-St-Zip: ROCHESTER, NY 14623

Title: P () Delete
Name: WALSH, PATTI
Address: 845 NIEMEN DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: WALSH, PATTI
Address: 5101 MAGNOLIA BAY CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: PATTI WALSH

P

03/24/2005

Electronic Signature of Signing Officer or Director

Date