


**FILED**  
**Feb 10, 2005 8:00 am**  
**Secretary of State**

01-18-2005 90028 017 \*\*\*150.00

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # P03000054107</b> 1. Entity Name <b>LJC BATTERY CO.</b>	
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Principal Place of Business <b>1057 PINELLAS BAYWAY TIERRE VERDE, FL 33715</b>	Mailing Address <b>1057 PINELLAS BAYWAY TIERRE VERDE, FL 33715</b>
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**66001563**



01112005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>81-0610221</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

**MICHAEL, JAMES P  
1057 PINELLAS BAYWAY  
TIERRE VERDE, FL 33715**

**DO NOT WRITE  
IN THIS SPACE**

8. 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

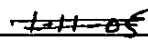
**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P SOBECK, LORI D 1057 PINELLAS BAYWAY S SAINT PETERSBURG, FL 33715</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>S WASILEWSKOI, CHRISTINE 5250 41ST ST. S SAINT PETERSBURG, FL 33711</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

 **727 287 2204**  
Date Daytime Phone #

*Lori D. Sobek*

*2/7/05 727-287-2204*