

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000060693

Entity Name: HAROLD WAKELEY III, P.A.

FILED
Jul 09, 2005
Secretary of State

Current Principal Place of Business:

8060 NORTH CYPRESS DRIVE
FORT MYERS, FL 33912

New Principal Place of Business:

18860 PINE RUN LANE
FORT MYERS, FL 33912

Current Mailing Address:

8060 NORTH CYPRESS DRIVE
FORT MYERS, FL 33912

New Mailing Address:

18860 PINE RUN LANE
FORT MYERS, FL 33912

FEI Number: 20-0097968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOMERS, WILLIAM A
3465 BONITA BEACH ROAD UNIT 12
BONITA SPRINGS, FL 34133 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WAKELEY, DEBRA
Address: 8060 NORTH CYPRESS DRIVE
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WAKELEY, DEBRA
Address: 18860 PINE RUN LANE
City-St-Zip: FORT MYERS, FL 33912

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: DEBRA WAKELEY

PD

07/09/2005

Electronic Signature of Signing Officer or Director

Date