

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000067344

FILED
Jan 12, 2005
Secretary of State

Entity Name: ADRIENNE C. GRAEBER, P.A.

Current Principal Place of Business:

5992 GREY FOX RUN
FORT MYERS, FL 33912

New Principal Place of Business:

14910 LAGUNA DRIVE
FORT MYERS, FL 33908 US

Current Mailing Address:

5992 GREY FOX RUN
FORT MYERS, FL 33912

New Mailing Address:

14910 LAGUNA DRIVE
FORT MYERS, FL 33908 US

FEI Number: 51-0474676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAEBER, ADRIENNE C
5992 GREY FOX RUN
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

GRAEBER, ADRIENNE C
14910 LAGUNA DRIVE
FORT MYERS, FL 33908 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: ADRIENNE C. GRAEBER

01/12/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GRAEBER, ADRIENNE C
Address: 5992 GREY FOX RUN
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GRAEBER, ADRIENNE C
Address: 14910 LAGUNA DRIVE
City-St-Zip: FORT MYERS, FL 33908 FL

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: ADRIENNE C. GRAEBER

P

01/12/2005

Electronic Signature of Signing Officer or Director

Date