

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000100282

Entity Name: NOW I SEE AND ASSOCIATES INC.

FILED  
Feb 18, 2005  
Secretary of State

## Current Principal Place of Business:

P O BOX 40108  
JACKSONVILLE, FL 32203

## New Principal Place of Business:

6034 CHESTER AVE.  
207F  
JACKSONVILLE, FL 32217

## Current Mailing Address:

P O BOX 40108  
JACKSONVILLE, FL 32203

## New Mailing Address:

6034 CHESTER AVE.  
207F  
JACKSONVILLE, FL 32217

FEI Number: 37-1475317

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOHN, JOSEPH L PRES  
P O BOX 40108  
JACKSONVILLE, FL 32203 US

## Name and Address of New Registered Agent:

KOHN, JOSEPH L PRES  
6034 CHESTER AVE.  
207F  
JACKSONVILLE, FL 32217 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: JOSEPH L. BORDES-KOHN

02/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: KOHN, JOSEPH L CEO  
Address: P O BOX 40108  
City-St-Zip: JACKSONVILLE, FL 32203

Title: DP ( ) Delete  
Name: KOHN, DOROTHY E VP  
Address: P O BOX 40108  
City-St-Zip: JACKSONVILLE, FL 32203

Title: DPF ( ) Delete  
Name: DORSEY, FREDDIE FS  
Address: P O BOX 40108  
City-St-Zip: JACKSONVILLE, FL 32203

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: BORDES-KOHN, JOSEPH L CEO  
Address: 6034 CHESTER AVE.  
City-St-Zip: JACKSONVILLE, FL 32217

Title: VP (X) Change ( ) Addition  
Name: KOHN, DOROTHY E VP  
Address: 6034 CHESTER AVE.  
City-St-Zip: JACKSONVILLE, FL 32217

Title: FS (X) Change ( ) Addition  
Name: OCTAVIA, CORE N FS  
Address: 6034 CHESTER AVE.  
City-St-Zip: JACKSONVILLE, FL 32217

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: JOSEPH L. BORDES-KOHN

CEO

02/18/2005

Electronic Signature of Signing Officer or Director

Date