


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 20, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000124287**  
1. Entity Name  
**MANCARI & ASSOCIATES, P A**



Principal Place of Business      Mailing Address  
4530 BERISFORD BLVD      4530 BERISFORD BLVD  
PALM HARBOR, FL 34685      PALM HARBOR, FL 34685



04042005      No Chg-P      CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

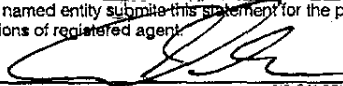
4. FEI Number  
**20-0374246**      Applied For  
Not Applicable

5. Certificate of Status Desired            **\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent  
  
MANCARI, FRANK JR  
4530 BERISFORD BLVD  
PALM HARBOR, FL 34685

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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  **FRANK MANCARI, JR. PRESIDENT**      **4-18-05**  
Signature, typed or printed name of registered agent and title if applicable.      (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	P
NAME	MANCARI, FRANJ JR.
STREET ADDRESS	4530 BERISFORD BLVD
CITY-ST-ZIP	PALM HARBOR, FL 34685
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:  **FRANK MANCARI, JR. PRESIDENT**      **4-18-05**      **727-385-4122**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #