

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 27, 2004 8:00 am**  
**Secretary of State**

07-27-2004 90035 018 \*\*\*150.00

**DOCUMENT # P03000128777**

1. Entity Name  
**RICHARD PELLETIER CONSULTING, INC.**



Principal Place of Business  
**7543 TARPAN COVE CIR  
LAKE WORTH, FL 33467**

Mailing Address  
**7543 TARPAN COVE CIR  
LAKE WORTH, FL 33467**

**54064933**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07212004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

**20-0380160**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**BUSH, MISTY L CPA  
3230 W COMMERCIAL BLVD STE 150  
FT LAUDERDALE, FL 33309**

7. Name and Address of New Registered Agent

Name **Richard Pelletier**

Street Address (P.O. Box Number is Not Acceptable)  
**7543 Tarpan Cove Cir**

City **Lake Worth**

**FL**

Zip Code  
**33467**

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 **RD Pelletier**

**Richard D Pelletier**

**12Jul04**

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  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
NAME **PELLETIER, RICHARD**  
STREET ADDRESS **7543 TARPAN COVE CIR**  
CITY-ST-ZIP **LAKE WORTH, FL 33467**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 to this address, with all other like empowered.

SIGNATURE **Richard D Pelletier**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**12Jul04**

Date

**561-304-1590**

Daytime Phone #

Attachment



Kofsky, Coury & Associates, PA

CERTIFIED PUBLIC ACCOUNTANTS

54064933

July 21, 2004

Division of Corporations  
P.O. Box 6198  
Tallahassee, FL 32314

Re: Richard Pelletier Consulting, Inc.  
Document #: P03000128777  
FEI #: 20-0380160  
2004 Form UBR

Please accept the 2004 Annual Report for the above referenced taxpayer, along with check #1025 in the amount of \$150 as timely.

The taxpayer did not receive the original postcard requesting the report. As this is a new corporation the officer did not realize the filing due date. The company takes its filing responsibilities seriously and intends to comply with the state requirements.

For just cause, please abate any penalties associated with this mishap and accept the report and check as timely and payment in full. Thank you for your assistance in this matter.

Sincerely,

Misty L. Bush  
Certified Public Accountant