


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

**Jan 31, 2005 08:00 AM
Secretary of State**

DOCUMENT # P03000140707 1. Entity Name RICHARD E ERWIN INC					
Principal Place of Business 8114 ROGERS PLACE WESLEY CHAPEL FL 33544			Mailing Address 8114 ROGERS PLACE WESLEY CHAPEL FL 33544		
2. Principal Place of Business Suite, Apt. #, etc City & State Zip Country			3. Mailing Address Suite, Apt. #, etc City & State Zip Country		
4. FEI Number 59-2957544				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BELLUSO, MARK A 5011 ALLEN ROAD ZEPHYRHILLS FL 33541			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ERWIN, RICHARD E 8114 ROGERS PLACE WESLEY CHAPEL FL 33544		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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1st MOORE CR2E034 (10/04)

59-2957544

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BELLUSO, MARK A
5011 ALLEN ROAD
ZEPHYRHILLS FL 33541

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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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: Richard E Erwin 1-27-05 813-9971441
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #