## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000140976

City-St-Zip:

Entity Name: PHILIP H. TALBERT & ASSOCIATES, INC.

FILED Mar 30, 2005 Secretary of State

y	e. Triileii T	i. IAEBERT WAOOOOIATEO,					
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
	T OCEAN DR. ERDALE, FL						
Current Mailing Address:			New Maili	New Mailing Address:			
	T OCEAN DR. ERDALE, FL						
FEI Number	: 54-2134144	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desire	ed ( )	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
TALBERT 3500 GAL FT. LAUDI	, PHILIP H T OCEAN DR. ERDALE, FL	, SUITE 1516 33308 US					
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered o	office or registered agent,	or both,	
SIGNATUI	RE:						
	Electro	nic Signature of Registered A	gent		Date		
Election Car	mpaign Financir	g Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	TALBERT, PHI 3500 GALT OC	) Delete LIP H CEAN DR., SUITE 1516 ALE, FL 33308	Title: Name: Address: City-St-Zip:	(	) Change ()Addition		
Title: Name: Address: City-St-Zip:	CHACON-TALE 3500 GALT OC	) Delete BERT, ADA J SECY CEAN DR., SUITE 1516 ALE, FL 33308	Title: Name: Address: City-St-Zip:	(	) Change()Addition		
Title: Name: Address:	(	) Delete	Title: Name: Address:	VPD ( TALBERT, PHI 908 FIRETREE			

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.

City-St-Zip:

NORTH PALM BEACH, FL 33408

SIGNATURE: PHILIP H. TALBERT PD 03/30/2005