

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2005 8:00 am**  
**Secretary of State**

05-03-2005 90133 021 \*\*\*150.00

**DOCUMENT # P03000148565**

1. Entity Name  
**THE SHARP CORPORATION OF CENTRAL FLORIDA, INC.**



Principal Place of Business  
**9703 E. GOLDFINCH LANE  
INVERNESS, FL 34450**

Mailing Address  
**P.O. BOX 1869  
INVERNESS, FL 34451-1869**

14010000



2. Principal Place of Business  
**9324 E. Crescent Drive**  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

03162004 Chg-P CR2E034 (10/03)

City & State  
**Inverness, FL**  
Zip **34450** Country **USA**

City & State

4. FEI Number  
**54-2137096**

Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

**POOTON, HARRY A  
9703 E. GOLDFINCH LANE  
INVERNESS, FL 34450**

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
**9324 E. Crescent Drive**  
City **Inverness** **FL** Zip Code **34450**

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

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, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

## 10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	POOTON, HARRY A	9703 E. GOLDFINCH LANE	INVERNESS, FL 34450	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Add
President	Pooton, Harry A.	9324 E. Crescent Drive	Inverness, FL 34450	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**4-2705-352220098**