


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000151331	
1. Entity Name JESSE ANTHONY PRESSURE WASHING INC.	

Principal Place of Business 1787 POINCIANA AVE TITUSVILLE, FL 32796	Mailing Address 1787 POINCIANA AVE TITUSVILLE, FL 32796
---	---

DO NOT WRITE IN THIS SPACE

02102005 No Chg-P CR2E034 (10/03)

4. FEI Number 20-0476758	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ANTHONY, JESSE A SR.
1787 POINCIANA AVE.
TITUSVILLE, FL 32796

**DO NOT WRITE
IN THIS SPACE**

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: Jesse A. Anthony Jesse A. ANTHONY 3/3/05 DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-issuing)

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

U00000253872
03/07/05-80050-017 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ANTHONY, JESSE A SR. 1787 POINCIANA AVE. TITUSVILLE, FL 32796
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP ANTHONY, JOAN E 1787 POINCIANA AVE. TITUSVILLE, FL 32796
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Jesse A. Anthony Jesse A. ANTHONY 3/3/05 321 269-1520 DATE Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR