

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000156085

Entity Name: STEWART & TWINE, P.A.

FILED
Jan 26, 2005
Secretary of State

Current Principal Place of Business:

601 E. TWIGGS ST., 4TH FLOOR
TAMPA, FL 33602

New Principal Place of Business:

501 EAST KENNEDY BOULEVARD
SUITE 715
TAMPA, FL 33602

Current Mailing Address:

601 E. TWIGGS ST., 4TH FLOOR
TAMPA, FL 33602

New Mailing Address:

501 EAST KENNEDY BOULEVARD
SUITE 715
TAMPA, FL 33602

FEI Number: 20-0529244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, DELANO S
601 E. TWIGGS ST., 4TH FLOOR
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

STEWART, DELANO S
501 EAST KENNEDY BOULEVARD
SUITE 715
TAMPA, FL 33602 US

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.

SIGNATURE:

01/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: STEWART, DELANO S
Address: 601 E TWIGGS ST, 4TH FLOOR
City-St-Zip: TAMPA, FL 33602

Title: PT () Delete
Name: TWINE-THOMAS, BARBARA
Address: 601 E TWIGGS ST, 4TH FLOOR
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: STEWART, DELANO S
Address: 501 EAST KENNEDY BLVD #715
City-St-Zip: TAMPA, FL 33602

Title: VP/D (X) Change () Addition
Name: TWINE-THOMAS, BARBARA
Address: 501 EAST KENNEDY BLVD #715
City-St-Zip: TAMPA, FL 33602

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.

SIGNATURE: DELANO S. STEWART

P/D

01/26/2005

Electronic Signature of Signing Officer or Director

Date