

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000156250

Entity Name: GROUND FLOOR ZERO, INC.

**FILED**  
**Jun 14, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

6604 N. ELIZABETH ST.  
TAMPA, FL 33604

**New Principal Place of Business:**

**Current Mailing Address:**

6604 N. ELIZABETH ST.  
TAMPA, FL 33604

**New Mailing Address:**

FEI Number: 54-2138217

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHERSTY, THOMAS P  
6604 N. ELIZABETH ST.  
TAMPA, FL 33604 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SHERSTY, THOMAS P  
Address: 6604 N. ELIZABETH ST.  
City-St-Zip: TAMPA, FL 33604

Title: VP ( ) Delete  
Name: SHERSTY, JOHN A  
Address: 10602 TANNER RD.  
City-St-Zip: TAMPA, FL 33610

Title: VP ( ) Delete  
Name: HANKS, THOMAS F  
Address: 8406 N. EDISON AVE.  
City-St-Zip: TAMPA, FL 33604

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: ANDERSON, BRIAN K  
Address: 10516 TANNER ROAD  
City-St-Zip: TAMPA, FL 33610

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: THOMAS P SHERSTY

P

06/14/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date