2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 11, 2005 08:00 AM Secretary of State DOCUMENT # P04000002015 1, Entity Name DICK SEAGLE & ASSOCIATES, INC. Principal Place of Business Mailing Address 7357 INTERNATIONAL PLACE, STE 107 SARASOTA FL 34240 7357 INTERNATIONAL PLACE, STE 107 SARASOTA FL 34240 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 61-1464246 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SEAGLE, HENRY H JR Street Address (P.O. Box Number is Not Acceptable) 7357 INTERNATIONAL PLACE, STE 107 SARASOTA FL 34240 Zip Code 3. 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 required when reinstating DATE FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 antiquition. Trust Fund Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. **OTE** Change ☐ Addition TITLE Delete SEAGLE, HENRY H JR NAME U00000224675 STREET ADDRESS STREET ADDRESS 7357 INTERNATIONAL PLACE, STE 107 02/11/05-80007-014 150.00 CHY-SI-ZIP SARASOTA FL 34240 CITY-ST-ZIP Inte Change ☐ Addition ₩.E ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY ST-ZIP ☐ Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY-ST-ZIP THE ☐ Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition HITE Delete THE F NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Delete HTE Change Addition THLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-7IP

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

Seagle Jr., 9 Feb 05, 941.373

all other like empowered.

changed, or on an attachment with an address, with

SIGNATURE:

FILED