

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000002740

FILED
Jan 11, 2005
Secretary of State

Entity Name: SOOBADRA CAMILLE GAUTHIER, P.A.

Current Principal Place of Business:

445 DOUGLAS AVENUE, SUITE 2005-9
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

409 MONTGOMERY RD.
SUITE 165
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

445 DOUGLAS AVENUE, SUITE 2005-9
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

P.O. BOX 162172
ALTAMONTE SPRINGS, FL 32716 US

FEI Number: 83-0380787

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAUTHIER, SOOBADRA C
300 ISABELLA DRIVE
LONGWOOD, FL 32750 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: GAUTHIER, SOOBADRA C
Address: 300 ISABELLA DRIVE
City-St-Zip: LONGWOOD, FL 32750 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GAUTHIER, SOOBADRA C
Address: 300 ISABELLA DRIVE
City-St-Zip: LONGWOOD, FL 32750 US

Title: SECT () Change (X) Addition
Name: GAUTHIER, SOOBADRA C
Address: 300 ISABELLA DRIVE
City-St-Zip: LONGWOOD, FL 32750

Title: TREA () Change (X) Addition
Name: GAUTHIER, SOOBADRA C
Address: 300 ISABELLA DRIVE
City-St-Zip: LONGWOOD, FL 32750

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: SOOBADRA C. GAUTHIER

PRES

01/11/2005

Electronic Signature of Signing Officer or Director

Date