


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 27, 2005 8:00 am
Secretary of State

07-27-2005 90043 006 ***150.00

DOCUMENT # P04000004405

1. Entity Name
DORETT GORDON, INC



Principal Place of Business Mailing Address
14451 76TH ROAD N **14451 76TH ROAD N**
LOXAHATCHEE, FL 33470 **LOXAHATCHEE, FL 33470**


50057749

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



07222005 Chg-P CR2E034 (10/03)

4. FEI Number Applied For
80-0090587 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GORDON, DORETT
14451 76TH ROAD N
LOXAHATCHEE, FL 33470

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
P	GORDON, DORETT	14451 76TH ROAD N	LOXAHATCHEE, FL 33470	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:  Date: **7-27-05** Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT
50057749

C.R. COOPER, CPA, PA
1495 FOREST HILL BLVD STE B
WEST PALM BEACH, FLORIDA 33406

American Institute of
Certified Public Accountants

(561) 964-6927
(561) 432-0008

Florida Institute of
Certified Public Accountants

FAX (561) 433-3596

July 22, 2005

Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Taxpayer: DORETT GORDON, INC.

Document #: P04000004405

FEIN: 80-0090587

Tax Form: UBR

Tax Period: 2005

To Whom It May Concern:

We have enclosed check # in the amount of \$150.00 for the 2005 Annual Renewal of DORETT GORDON, INC., Document # 80-0090587.

Please abate the penalty as Ms. Gordon did not receive the original UBR. The Corporation is newly formed and did not intentionally avoid the filing fee.

Thank you for your prompt attention to this matter. Please contact our office if any further information or explanation is required.

Respectfully,


C. R. Cooper, CPA

Encl.

cc