


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Sep 12, 2005 8:00 am
Secretary of State

08-29-2005 90146 026 ***150.00

DOCUMENT # P04000011189 1. Entity Name JAMES F. NELSON, JR., P.A.					
Principal Place of Business 6531 SW 84TH ST OCALA FL 34476			Mailing Address 6531 SW 84TH ST OCALA FL 34476		
2. Principal Place of Business James F Nelson Jr, PA Suite, Apt. #, etc. 7590 SW 188 Ave City & State Dunnellon, FL Zip 34432		3. Mailing Address James Nelson Jr, PA Suite, Apt. #, etc. 7590 SW 188 Ave City & State Dunnellon, FL Zip 34432		2nd MOORE CR2E034 (5/05) Applied For 20-0583025 Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent NELSON, JAMES F JR 6531 SW 84TH ST OCALA FL 34476	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 7590 SW 188 Ave City Dunnellon, FL Zip Code 34432				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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
FILE NOW!!! FEE IS \$550.00 DUE BY September 7, 2005 Make Check Payable to Florida Department of State			S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. <input checked="" type="checkbox"/>		
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			10. OFFICERS AND DIRECTORS		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			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: <u>James Nelson Jr</u> Nelson SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date <u>8-24-05</u> Daytime Phone # <u>489-5035</u>		



ATTACHMENT

66027217

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

August 31, 2005

JAMES NELSON JR INC.
7590 SW 188 AVE
DUNNELLON, FL 34432

Subject: JAMES F. NELSON, JR., P.A.

Reference Number: P04000011189

Fixed 9/06
CW

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The Federal Employer Identification Number listed in Block 4 appears to be invalid. An FEI number is comprised of nine digits and it is not the same as your Social Security number. Please amend your document accordingly. For more information about the FEI number, please call the Internal Revenue Service at 1-800-829-1040.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

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ANNUAL REPORTS SECTION