2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jan 23, 2005
Secretary of State

DOCUMENT# P04000012183

Entity Name: SHIRLYN A. PERKOVICH, P.A.

Current Principal Place of Business:

411 S. CENTRAL AVE.
FLAGLER BEACH, FL 32136

New Principal Place of Business:

Current Mailing Address:

411 S. CENTRAL AVE.
FLAGLER BEACH, FL 32136

New Mailing Address:

8 ERICKSON PLACE
PALM COAST, FL 32164

FEI Number: 58-2680404 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PERKOVICH, SHIRLYN A
411 S. CENTRAL AVE
FLAGLER BEACH, FL 32136 US

Name and Address of New Registered Agent:

PERKOVICH, SHIRLYN A P.A.
8 ERICKSON PLACE
PALM COAST, FL 32164 US

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: SHIRLYN A. PERKOVICH P.A. 01/23/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PERKOVICH, SHIRLYN A
Address: 411 S. CENTRAL AVE
City-St-Zip: FLAGLER BEACH, FL 32136

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PERKOVICH, SHIRLYN A P.A.
Address: 8 ERICKSON PLACE
City-St-Zip: PALM COAST, FL 32164

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: SHIRLYN A. PERKOVICH P.A D 01/23/2005
Electronic Signature of Signing Officer or Director Date