

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000012696

FILED  
Feb 25, 2005  
Secretary of State

Entity Name: TIMOTHY D. SCHIRRIPA, P.A.

## Current Principal Place of Business:

10615 N.W. 48TH STREET  
CORAL SPRINGS, FL 33076 US

## New Principal Place of Business:

850 RIVERSIDE DR.  
CORAL SPRINGS, FL 33071 US

## Current Mailing Address:

10615 N.W. 48TH STREET  
CORAL SPRINGS, FL 33076 US

## New Mailing Address:

850 RIVERSIDE DR.  
CORALSPRINGS, FL 33071

FEI Number: 20-0622405

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHIRRIPA, TIMOTHY D  
10615 N.W. 48TH STREET  
CORAL SPRINGS, FL 33076 US

## Name and Address of New Registered Agent:

SCHIRRIPA, TIMOTHY D  
8205 N.W. 91 TERRACE  
TAMARAC, FL 33321 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: TIMOTHY SCHIRRIPA

02/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SCHIRRIPA, TIMOTHY D  
Address: 10615 N.W. 48TH STREET  
City-St-Zip: CORAL SPRINGS, FL 33076 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SCHIRRIPA, TIMOTHY D  
Address: 8205 N.W. 91 TERRACE  
City-St-Zip: TAMARAC, FL 33321 US

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: TIMOTHY SCHIRRIPA

P

02/25/2005

Electronic Signature of Signing Officer or Director

Date