

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000015429

FILED
Apr 26, 2005
Secretary of State

Entity Name: MICHAEL'S ACCOUNTING & CONSULTING SERVICES, INC.

Current Principal Place of Business:

3806 ENCHANTED OAKS LANE
SEBRING, FL 33875

New Principal Place of Business:

112 GRANT AVE NE
LAKE PLACID, FL 33862

Current Mailing Address:

3806 ENCHANTED OAKS LANE
SEBRING, FL 33875

New Mailing Address:

PO BOX 2143
LAKE PLACID, FL 33862

FEI Number: 51-0419414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUIGLEY, MICHAEL A JR.
3806 ENCHANTED OAKS LANE
SEBRING, FL 33875 US

Name and Address of New Registered Agent:

QUIGLEY, MICHAEL A JR.
112 GRANT AVE NE
LAKE PLACID, FL 33852 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:

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: QUIGLEY, MICHAEL A JR.
Address: 3806 ENCHANTED OAKS LANE
City-St-Zip: SEBRING, FL 33875

Title: VD () Delete
Name: STAYTON-QUIGLEY, JOANNE E
Address: 3806 ENCHANTED OAKS LANE
City-St-Zip: SEBRING, FL 33875

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: QUIGLEY, MICHAEL A JR.
Address: 112 GRANT AVE NE
City-St-Zip: LAKE PLACID, FL 33852

Title: VD (X) Change () Addition
Name: STAYTON-QUIGLEY, JOANNE E
Address: 112 GRANT AVE NE
City-St-Zip: LAKE PLACID, FL 33852

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: MICHAEL A QUIGLEY JR

PRES

04/26/2005

Electronic Signature of Signing Officer or Director

Date