

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000021942

Entity Name: ALICIA FUZZELL FORD, P.A.

FILED
May 25, 2005
Secretary of State

Current Principal Place of Business:

1511 BUENOS AIRES BLVD
LADY LAKE, FL 32159

New Principal Place of Business:

950 LAKESHORE DR.
THE VILLAGES, FL 32162

Current Mailing Address:

1511 BUENOS AIRES BLVD
LADY LAKE, FL 32159

New Mailing Address:

1607 HAMPTON ROAD
LEESBURG, FL 34748

FEI Number: 65-1217690

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, L.E.
1029 W MAGNOLIA ST
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FUZZELL FORD, ALICIA
Address: 1511 BUENOS AIRES BLVD
City-St-Zip: LADY LAKE, FL 32159

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FUZZELL FORD, ALICIA
Address: 1607 HAMPTON ROAD
City-St-Zip: LEESBURG, FL 34748

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: ALICIA FUZZELL FORD

D

05/25/2005

Electronic Signature of Signing Officer or Director

Date