

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000028309

Entity Name: ELLEN LEE AMOROSO, P.A.

FILED
Jan 10, 2005
Secretary of State

Current Principal Place of Business:

3900 CENTRAL AVE #101
FT MYERS, FL 33901

New Principal Place of Business:

6633 IDLEWILD STREET
FT MYERS, FL 33912 US

Current Mailing Address:

3900 CENTRAL AVE #101
FT MYERS, FL 33901

New Mailing Address:

6633 IDLEWILD STREET
FT MYERS, FL 33912 US

FEI Number: 34-1976380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMOROSO, ELLEN L
3900 CENTRAL AVE #101
FT MYERS, FL 33901 US

Name and Address of New Registered Agent:

AMOROSO, ELLEN L
6633 IDLEWILD STREET
FT MYERS, FL 33912 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: ELLEN L. AMOROSO

01/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AMOROSO, ELLEN L
Address: 3900 CENTRAL AVE #101
City-St-Zip: FT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AMOROSO, ELLEN L
Address: 6633 IDLEWILD STREET
City-St-Zip: FT MYERS, FL 33912 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: ELLEN L. AMOROSO

D

01/10/2005

Electronic Signature of Signing Officer or Director

Date