2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 07, 2005 8:00 am Secretary of State 03-07-2005 90291 038 ***150 00 DOCUMENT # P04000031997 1. Entity Name JEFFREY J. BORDULIS, P.A. Principal Place of Business Mailing Address 20019013 182 S CENTRAL AVE 182 S CENTRAL AVE OVIEDO, FL 32765 OVIEDO, FL 32765 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 01032005 Chg-P Applied For City & State 4. FEI Number City & State Not Applicable Country U C A \$8.75 Additional 5. Certificate of Status Desired iJSÁ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BORDULIS, JEFFREY J Street Address (P.O. Box Number is Not Acceptable) 182 S CENTRAL AVE **OVIEDO, FL 32765** City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS ☐ Delete TITLE **X** Addition Vicki P. Bordulis 175 Nandina Terrace Withor springs, FL 32708 BORDULIS, JEFFREY J NAME NAME 182 S CENTRAL AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OVIEDO, FL 32765 CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change Addition Jeffrey J. Bordulis 182 S. central Avenue NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Oriedo, FL 32765 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

J. Bordulis 2/28/05 (407) 366-7770

SIGNATURE: