

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000042558

FILED  
Feb 08, 2005  
Secretary of State

**Entity Name:** PMM PROPERTY MANAGEMENT MASTER, INC.

**Current Principal Place of Business:**

2352 ST. CHARLES DR.  
CLEARWATER, FL 33764

**New Principal Place of Business:**

**Current Mailing Address:**

2352 ST. CHARLES DR.  
CLEARWATER, FL 33764

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STANLEY, MICHAEL  
2352 ST. CHARLES DR.  
CLEARWATER, FL 33764 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LANGER, PETER  
Address: 334 EAST LAKE RD #288  
City-St-Zip: PALM HARBOR, FL 34685

Title: D ( ) Delete  
Name: KIELLACH, DOROTHY  
Address: 2737 ENTERPRISE RD. #112  
City-St-Zip: CLEARWATER, FL 33759

Title: D ( ) Delete  
Name: STANLEY, MICHAEL  
Address: 2352 ST. CHARLES DR.  
City-St-Zip: CLEARWATER, FL 33764

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 B. STANLEY

VICE

02/08/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date