



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2005 8:00 am
Secretary of State

03-08-2005 90181 022 ***150.00

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DOCUMENT # P04000048713 1. Entity Name ALLEN H. PEACOCK, P.A.																																																																																			
Principal Place of Business 2434 SHREWSBURY ROAD ORLANDO, FL 32803			Mailing Address 2434 SHREWSBURY ROAD ORLANDO, FL 32803																																																																																
2. Principal Place of Business 3 East Harvard Street Suite, Apt. #, etc. Orlando, Florida City & State 32804 Orange Zip Country		3. Mailing Address 3 East Harvard Street Suite, Apt. #, etc. Orlando, Florida City & State 32804 Orange Zip Country																																																																																	
4. FEI Number 20-0883529				Applied For <input type="checkbox"/> Not Applicable																																																																															
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				01032005 Chg-P CR2E034 (10/03)																																																																															
6. Name and Address of Current Registered Agent PEACOCK, ROBERT W JR. 2434 SHREWSBURY ROAD ORLANDO, FL 32803			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (NOTE: Registered Agent signature required when transferring) DATE _____																																																																																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																	
10. 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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.																																																																																			
SIGNATURE: <u>Allen H. Peacock</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <u>3/3/05</u>		Daytime Phone #: <u>407-496-2626</u>																																																																														