2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005
Secretary of State

DOCUMENT# P04000058150

Entity Name: TROY'S 24/7 BAIL BONDS, INC.

Current Principal Place of Business:

12 N. LIBERTY ST.
SUITE A
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

12 N. LIBERTY ST.
SUITE A
JACKSONVILLE, FL 32202

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:

NEELEY, TROY J
12 N. LIBERTY ST.
SUITE A
JACKSONVILLE, FL 32202 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: P ( ) Delete
Name: NEELEY, TROY J
Address: 12 N. LIBERTY ST. SUITE A
City-St-Zip: JACKSONVILLE, FL 32202

Title: VP ( ) Delete
Name: NEELEY, NANCY
Address: 12 N. LIBERTY ST. SUITE A
City-St-Zip: JACKSONVILLE, FL 32202

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: NEELEY, TROY J
Address: 12 N. LIBERTY ST. SUITE A
City-St-Zip: JACKSONVILLE, FL 32202

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

Title: TRES ( ) Change (X) Addition
Name: NEELEY, CHERYL H
Address: 12 N. LIBERTY ST SUITE A
City-St-Zip: JACKSONVILLE, FL 32202

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: TROY NEELEY PRES 05/02/2005
Electronic Signature of Signing Officer or Director — Date