


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2005 8:00 am
Secretary of State


05-23-2005 90008 042 ***150.00

DOCUMENT # P04000064416	
1. Entity Name BOBBIE A. VINCENT, P.A.	

Principal Place of Business 5200 OCEAN BOULEVARD SARASOTA, FL 34242	Mailing Address 5200 OCEAN BOULEVARD SARASOTA, FL 34242
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2. Principal Place of Business 2391 10th ST	3. Mailing Address 2391 10th ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State SARASOTA	City & State SARASOTA, FL
Zip FL	Country USA
Zip 34237	Country USA

	
05192005	Chg-P CR2E034 (10/03)
4. FEI Number 56-2461102	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent KOHL-HELBIG, LAUREN 1800 SECOND STREET SUITE #901 SARASOTA, FL 34236	
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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VINCENT, BOBBIE A 3333 FULLER STREET SARASOTA, FL 34231 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VINCENT, BOBBIE A. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2391 10th ST SARASOTA, FL 34237
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Bobbie A. Vincent BOBBIE A. VINCENT 5-18-05 349-5200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
D8400026446
20CS9257

May 18, 2005

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Annual Report

To Whom It May Concern:

I am enclosing my annual report and the \$150.00 fee. This is the first year I've been incorporated. I moved to a different location for business on January 29, 2005 and my mail was being held at the old location. Therefore, I did not receive a notice for an annual report.

I am hoping you will waive the \$400.00 fee this time. Now that I know when these reports are due, I will be looking for them well in advance.

Sincerely,



Bobbie Vincent
Bobbie Vincent, P.A.
2391 10th Street
Sarasota, FL 34237