

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 21, 2005 8:00 am**  
**Secretary of State**

04-21-2005 90239 004 \*\*\*158.75

**DOCUMENT # P04000064886**

1. Entity Name  
**JOHN W DEMKO JR. PROPERTY APPRAISER PA**



Principal Place of Business  
**458 CERROMAR DR. #383  
VENICE, FL 34293**

Mailing Address  
**458 CERROMAR DR. #383  
VENICE, FL 34293**

**40064647**



2. Principal Place of Business  
**1321 Cypress Avenue**  
Suite, Apt. #, etc.

3. Mailing Address  
**1321 Cypress Avenue**  
Suite, Apt. #, etc.

03112005 Chg-P CR2E034 (10/03)

City & State  
**Venice Florida**  
Zip  
**34285**  
Country  
**Sarasota**

City & State  
**Venice Florida**  
Zip  
**34285**  
Country  
**Sarasota**

4. FEI Number  
**20-1019102**  
Applied For  
☒ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DEMKO, JOHN W JR.  
458 CERROMAR DR. #383  
VENICE, FL 34293**

7. Name and Address of New Registered Agent

Name **John Demko**  
Street Address (P.O. Box Number is Not Acceptable)  
**1321 Cypress Avenue**  
City **Venice** FL Zip Code **34285**

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 **John Demko** DATE **4/18/05**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete  
NAME **DEMKO, JOHN W JR.**  
STREET ADDRESS **458 CERROMAR DRIVE #383**  
CITY-ST-ZIP **VENICE, FL 34293**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition  
NAME **John Demko Jr.**  
STREET ADDRESS **1321 Cypress Avenue**  
CITY-ST-ZIP **Venice FL 34285** See Below

TITLE **P** ☒ Change ☐ Addition  
NAME **Demko, John W. Jr.**  
STREET ADDRESS **1321 Cypress Avenue**  
CITY-ST-ZIP **Venice FL 34285**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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.

SIGNATURE: **John Demko** DATE **4/18/05** DAYTIME PHONE # **941-468-9518**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR