## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000071016

Entity Name: FBW OF POTTSBURG CREEK, INC.

FILED Jan 03, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

2727 ST. JOHNS BLUFF ROAD
SUITE 203
JACKSONVILLE, FL 32211
JACKSONVILLE, FL 32246

Current Mailing Address: New Mailing Address:

2727 ST. JOHNS BLUFF ROAD
SUITE 203
JACKSONVILLE, FL 32246
31 UNIVERSITY BLVD N
JACKSONVILLE, FL 32211

FEI Number: 20-1087040 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KELLY, TIMOTHY P 1016 LASALLE STREET SECOND FLOOR JACKSONVILLE, FL 32207 US

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 SOURDIFF, KULLEN
 Name:
 SOURDIFF, KULLEN

 Address:
 2727 ST. JOHNS BLUFF ROAD, SUITE 203
 Address:
 5521 CHRONICLE CT

 City-St-Zip:
 JACKSONVILLE, FL 32246
 City-St-Zip:
 JACKSONVILLE, FL 32256

Title: ( ) Delete Title: PD ( ) Change (X) Addition

 Name:
 Name:
 GROUP, ROBERT R

 Address:
 Address:
 31 UNIVERSITY BLVD N

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32211

Title: ( ) Delete Title: VD ( ) Change (X) Addition

 Name:
 Name:
 GROUP, SHANNON K

 Address:
 Address:
 31 UNIVERSITY BLVD N

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32211

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: ROBERT R. GROUP P 01/03/2005