## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000111651

Entity Name: JANET L. POLLEN, P.A.

FILED Mar 02, 2005 Secretary of State

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

4504 HIGHWAY 20 E 4504 HIGHWAY 20 E

SUITE A SUITE A

NICEVILLE, FL 32578 NICEVILLE, FL 32578 US

Current Mailing Address: New Mailing Address:

4504 HIGHWAY 20 E 4504 HIGHWAY 20 E

SUITE A SUITE A NICEVILLE, FL 32578 NICEVILLE

NICEVILLE, FL 32578 US

FEI Number: 84-1653785 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:

POLLEN, JANET L 4302 HIDDEN LAKES DRIVE NICEVILLE, FL 32578 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: PSD () Delete Title: PSD (X) Change () Addition

 Name:
 POLLEN, JANET L
 Name:
 POLLEN, JANET L

 Address:
 4302 HIDDEN LAKES DRIVE
 Address:
 4302 HIDDEN LAKES DRIVE

 City-St-Zip:
 NICEVILLE, FL 32578
 City-St-Zip:
 NICEVILLE, FL 32578 US

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: JANET L. POLLEN PSD 03/02/2005