## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 27, 2005 8:00 am Secretary of State

DOCUMENT # P04000114427  1. Entity Name DEE SHAUGHNESSY, P.A.						)	07-27-2005	5 90047 00	5 ***150	.00
Principal Place of Business 4418 SW 1ST AVENUE CAPE CORAL, FL 33914			Mailing Address 4418 SW 1ST AVENUE CAPE CORAL, FL 33914				O SIIIR ON ON IN CONTRACT	aran maan mam are		57946
2. Principal Place of Business			3. Mailing Address 1318 Lafayette St.							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			07202005	Chg-P	CR2E03	34 (10/03)	
City & State			City & State  Cape Coral	FI.		4. FEI Numbe	1463	-676	No	plied For t Applicable
Zip	C. Nama	22221		Coun	ISA		of Status Desired	<u> </u>	\$8.75 Add	itional j
SCHUTT, DARRIN R ESQ 1105 CAPE CORAL PARKWAY EAST SUITE C CAPE CORAL, FL 33904					7. Name and Address of New Registered Agent  Name Thomas W. Hill Street Address (P.O. Box Number is Not Acceptable)  1318 Lafayette St.  City Cape Coral  FL Zip Code 33904					
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. Speed or printed name of registered agent and little apply table. (NOTE: Registered Agent signature required when remistating)  DATE										
		! FEE I\$ \$550.00 otember 7, 2005	9. Election Camp Trust Fund Co		5.00 May Be ided to Fees					
10.	1_	OFFICERS AND		11.		ADDITIONS/	CHANGES TO O	FFICERS AND	_	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4418 SW	NESSY, DLIANE 1ST AVENUE DRAL, FL 33914	☐ Delete						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		-				Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Oclete		Į.				Change	☐ 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 in the 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 by trustee employeered 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 impowered.  SIGNATURE:										
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# PO40001/4427

1318 Lafayette Street Cape Coral, FL 33904 (239) 549-2444 Fax: (239) 549-5623 www.hillcocpa.com Royal Palm Square 1400 Colonial Blvd., Suite 17 Fort Myers, FL 33907 (239) 433-2444 Fax: (239) 275-3917

July 20, 2005

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Dee Shaughnessy, P.A. 2005 Annual Report

Dear Sir/Madam:

Enclosed find Annual Report for the referenced corporation and a check for \$150.00 to cover same. Our client, Ms. Shaughnessy was not aware of the form being received as she was looking for the booklet previously mailed in prior years.

Also, she was not aware she had to download the form and ask that you accept payment for the corporation without any interest or penalties as this was a complete oversight. Also note that the mailing address has been changed on the annual report to: 1318 Lafayette Street, Cape Coral, Florida 33904.

Thank you for giving this matter your prompt attention and hope to receive a favorable reply.

Sincerely,

Thomas W. Hill

Hill & Company, CPA, P.A.

Enclosures