

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

07-20-2005 90027 016 \*\*\*150.00  
P04000142756

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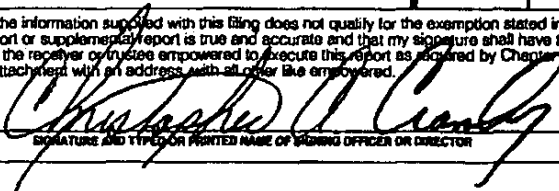
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

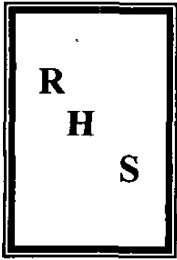
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**REINSTATEMENT**

<b>DOCUMENT # P04000142756</b>					
1. Entity Name CHRISTOPHER A. CRANDON, P.A.					
Principal Place of Business 3960 W SILVER SPRINGS BLVD OCALA, FL 34482			Mailing Address 3960 W SILVER SPRINGS BLVD OCALA, FL 34482		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-1752796	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CRANDON, CHRISTOPHER A 3960 W SILVER SPRINGS BLVD OCALA, FL 34482				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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>		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.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT / SECRETARY CHRISTOPHER A CRANDON 45 LAKEVIEW DR WEST OCALA FL 34482		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	
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	
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	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(X), Florida Statutes. I further certify that the information indicated on this report or supplemented 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 employed.					
SIGNATURE: 		7-15-05		352 427-1543	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

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**ROBERT H. SCHOEPE, P.A.**

*Certified Public Accountant*

2508 NE 8<sup>th</sup> Lane

Ocala, Florida 34470

October 26, 2005

Florida Dept of State  
Secretary of State  
Glenda E Hood  
Division of Corporations  
PO Bo x6327  
Tallahassee, FL 32314

RE: Christopher A Crandon, PA – Document #P04000142756

Dear Sir/Madam:

Enclosed you will find a copy of a cancelled check for \$150.00 for the 2005 Annual Report. When Christopher A Crandon, PA received the notice that \$550.00 was due for the annual report, we went on line and downloaded the form. When we did this, we were asked if he had received the first notice and the answer was "no". When we answered the question with a "no", the form printed that only \$150.00 was due if paid by September 7, 2005. The client took all of the appropriate actions and paid the fee before the September deadline. Please correct your reporting and send conformation of the corrections to Christopher A. Crandon, PA.

Thank you in advance for your co-operation in this matter.

Sincerely,

Cindy J. Marzella  
Charge Bookkeeper