

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2005 8:00 am
Secretary of State

01-07-2005 90004 025 ***150.00

DOCUMENT # P04000152071 1. Entity Name BONNIE PRICE, P.A.																																																																											
Principal Place of Business 211 NOKOMIS AVE. S. VENICE, FL 34285			Mailing Address 211 NOKOMIS AVE. S. VENICE, FL 34285																																																																								
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		 01052005 Chg-P CR2E034 (10/03) 4. FEI Number 20 1871817 Applied For Not Applicable																																																																							
City & State		City & State																																																																									
Zip	Country	Zip	Country																																																																								
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																											
6. Name and Address of Current Registered Agent PRICE, BONNIE 211 NOKOMIS AVE. S. VENICE, FL 34285				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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-issuing)																																																																											
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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">NAME</td> <td style="width: 10%;">STREET ADDRESS</td> <td style="width: 10%;">CITY - ST - ZIP</td> <td style="width: 20%; text-align: right;">☐ Delete</td> </tr> <tr> <td></td> <td>PRESIDENT, Vice President</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Sgt. Tree</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Bonnie Price</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>211 S. NOKOMIS AVE</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>VENICE FL 34285</td> <td></td> <td></td> <td></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">NAME</td> <td style="width: 10%;">STREET ADDRESS</td> <td style="width: 10%;">CITY - ST - ZIP</td> <td style="width: 20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>						TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Delete		PRESIDENT, Vice President					Sgt. Tree					Bonnie Price					211 S. NOKOMIS AVE					VENICE FL 34285				TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change ☐ Addition																																			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Bonnie Price

1/5/2005