## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000167983

Entity Name: G.E. GOFF & ASSOCIATES, INC.

FILED Mar 14, 2005 Secretary of State

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

5017 BYGONS STREET
KEHIGH ACRES, FL 33971

5017 BYGONE STREET
LEHIGH ACRES, FL 33971

Current Mailing Address: New Mailing Address:

5017 BYGONS STREET 5017 BYGONE STREET KEHIGH ACRES, FL 33971 LEHIGH ACRES, FL 33971

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GOFF, G. EDWARD
5017 BYGONS STREET
KEHIGH ACRES, FL 33971 US
GOFF, G. EDWARD
5017 BYGONE STREET
LEHIGH ACRES, FL 33971 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: 03/14/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GOFF, G. EDWARD
 Name:
 GOFF, G. EDWARD

 Address:
 5017 BYGONS STREET
 Address:
 5017 BYGONE STREET

 City-St-Zip:
 KEHIGH ACRES, FL 33971
 City-St-Zip:
 LEHIGH ACRES, FL 33971

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: G. EDWARD GOFF DIR. 03/14/2005