

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34473

**FILED**  
**Apr 26, 2005**  
**Secretary of State**

**Entity Name:** MAYFAIR ACCOUNTING AND TAX SERVICES, INC.

**Current Principal Place of Business:**

2501 RIO PALERMO CT.  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

**Current Mailing Address:**

2501 RIO PALERMO CT.  
PUNTA GORDA, FL 33950

**New Mailing Address:**

1515 FORREST NELSON BLVD.  
L103  
PORT CHARLOTTE, FL 33952

FEI Number: 34-1610131

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

KOSINSKI, KENNETH  
2501 RIO PALERMO CT.  
PUNTA GORDA, FL 33950 US

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

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:**

Title: PTC ( ) Delete  
Name: KOSINSKI, KENNETH,  
Address: 2501 RIO PALERMO CT.  
City-St-Zip: PUNTA GORDA, FL

Title: D ( ) Delete  
Name: KOSINSKI, KENNETH,  
Address: 2501 RIO PALERMO CT.  
City-St-Zip: PUNTA GORDA, FL

Title: S ( ) Delete  
Name: KOSINSKI, JULIE S.,  
Address: 2501 RIO PALERMO CT.  
City-St-Zip: PUNTA GORDA, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: EDLER, TERRI A.,  
Address: 1515 FORREST NESLON BLVD #L103  
City-St-Zip: PORT CHARLOTTE, FL

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: KENNETH KOSINSKI

PRES

04/26/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date