## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 07, 2005 08:00 AM Secretary of State

ANNUAL KEPUKI			Apr 07, 2005 00:00
DOCUMENT # P9300005019 1. Entity Name DOROTHY L HUKILL, P.A.	96		Secretary of State
Principal Place of Business 1620 S CLYDE MORRIS BLVD SUITE 110 DAYTONA BEACH, FL 32119 US	Maiting Address 1620 S CLYDE MORRIS BLVD SUITE 110 DAYTONA BEACH, FL 32119	US	
DO NOT WRITE I	N THIS SPA		04022005 No Chg-P CR2E034 (10/03)  4. FEI Number Applied For S9-3208653 Not Applied For Not Applied Status Desired S8.75 Additional Fee Required
HUKILL, DOROTHY L 1620 S CLYDE MORRIS BLVD SUITE 1110 DAYTTONA BEACH, FL 32119			DO NOT WRITE IN THIS SPACE
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, typed or printed name of registered agent and title if applicable.  [NOTE: Registered Agent signature required when reinstating)  DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	, but 24.	i.00 May Be ded to Fees
10. OFFICERS AND DIRI  TITLE D  NAME HUKILL, DOROTHY L  STREET ADDRESS CITY-ST-ZP  DAYTONA BEACH, FL  TITLE  NAME STREET ADDRESS CITY-ST-ZIP		Lead Marie (1997) Mire et 1997 (1997)	U00000292250 04/07/05-80063-024 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREED ADDRESS			DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP  13. Library Continue that the information curpilled with this	Silver stress but on ATE Y - sh	motion stated to Pro-	ables 140.07(9)/D. Florida Christian 1.5 of the 2011/19
12. I hereby certify that the information supplied with this filting does not qualify for the exemption stated in Section 119.07(3)(ii), 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 itustee 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 attactument with an address, with all other like empowered.  SIGNATURE:  SIGNATURE:  SIGNATURE AND TYPED OR PRINTED WARE OF SIGNING OFFICER ON DIRECTOR  Date  Date			