## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000088748

Entity Name: JUDY ALLOR, P.A.

FILED Jul 31, 2005 Secretary of State

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

101 SAN REMO DRIVE 200 WRENN ST.

ISLAMORADA, FL 33036 410

TAVERNIER, FL 33070

**Current Mailing Address: New Mailing Address:** 

200 WRENN ST. 101 SAN REMO DRIVE

ISLAMORADA, FL 33036 410

TAVERNIER, FL 33070

FEI Number: 65-0463196 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JUDY ALLOR JUDY ALLOR 101 SAN REMO DR. 200 WRENN ST. SUITE ONE

ISLAMORADA, FL 32301 US TAVERNIER, FL 33070 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: 07/31/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: **PVST** () Delete Title: **PVST** (X) Change ( ) Addition

ALLOR, JUDY Name: Name: ALLOR, JUDY 101 SAN REMO DR 200 WRENN ST. UNIT 410 Address: Address:

City-St-Zip: ISLAMORADA, FL 33036 City-St-Zip: TAVERNIER, FL 33070

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

Name: ALLOR, JUDY Name: ALLOR, JUDY 101 SAN REMO DR Address: 200 WRENN ST. Address: ISLAMORADA, FL 33036 TAVERNIER, FL 33070 City-St-Zip: City-St-Zip:

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: JUDY ALLOR **PRES** 07/31/2005