## 2005 FOR PROFIT CORPORATION

## **ANNUAL REPORT DOCUMENT # P94000044823** TOP PRODUCER CHARTERS, INC.



03-10-2005 90126 024 \*\*\*150.00

Mar 10, 2005 8:00 am Secretary of State

**FILED** 

Principal Place of Business

225 SEA COAST LANE PONTE VEDRA BEACH, FL 32082 Mailing Address

225 SEA COAST LANE PONTE VEDRA BEACH, FL 32082

## DO NOT WRITE IN THIS SPACE

No Chg-P 03042005

CR2E034 (10/03)

4. FEI Number 59-3270927

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BALDWN, GARRET J 225 SEA COAST LANE PONTE VEDRA BEACH, FL 32082

## DO NOT WRITE IN THIS SPACE

the obligat	named entity submits this statement for the plants of registered agent.	urpose of changing its registere	d office or re	gistered agent, or both, ii	n the State of Florida. T	am tamiliar with, and ac	<b>ж</b> рі	
SIGNATURE.	Signature, typed or printed name of registered agent and title for	applicable. (NOTE: Registered	Agent signature re	equired when reinstaing)	DA	TE		
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	Election Campaign Financing Trust Fund Contribution.   \$5.00 May 8e Added to Fees			\$ 9) \$ Council Constant to a respective use the information of the second office of the constant of the second office of the constant of the second office of the second of the second office of the second office of the second office of the second office of the second o		
10.	> OFFICERS AND DIREC	TORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALDWIN, GARRET J 225 SEA COAST LANE PONTE VEDRA BEACH, FL 32082							
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TITLE NAME STREET ADDRESS								

12. I hereby certify that the information supplied with this filing does not qualify 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 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 ampowered.

SIGNATURE:

CITY-ST-ZIP

SARRET J. BALDWIN