

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000057091

Entity Name: SCOTT GARRISON, P.A.

FILED
Jan 29, 2005
Secretary of State

Current Principal Place of Business:

5385 ROCKING HORSE PLACE
OVIEDO, FL 327656124

New Principal Place of Business:

460 STATE ROAD 436
STE. 104
CASSELBERRY, FL 32707

Current Mailing Address:

5385 ROCKING HORSE PLACE
200
OVIEDO, FL 327656124

New Mailing Address:

P.O. BOX 2303
GOLDENROD, FL 327332303

FEI Number: 59-3255811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARRISON, SCOTT
5385 ROCKING HORSE PLACE
DEBARY, FL 327536124 US

Name and Address of New Registered Agent:

GARRISON, SCOTT
P.O. BOX 2303
GOLDENROD, FL 327332303 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: SCOTT GARRISON

01/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GARRISON, SCOTT
Address: 5385 ROCKING HORSE PLACE
City-St-Zip: OVIEDO, FL 327536124

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
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: SCOTT GARRISON

P

01/29/2005

Electronic Signature of Signing Officer or Director

Date