


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 05, 2005 08:00 AM
Secretary of State**

DOCUMENT # P94000059527 1. Entity Name AHERN PROPERTIES, INC.	
-----------------------------------------------------------------------------------	-----------------------------------------------------------------------------------

Principal Place of Business 2215 SOUTH THIRD STREET STE. 201 JACKSONVILLE BEACH, FL 32250	Mailing Address 2215 SOUTH THIRD STREET STE. 201 JACKSONVILLE BEACH, FL 32250
-------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------



03292005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3270592	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--------------------------------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
-----------------------------------------------------------	-------------------------------------------

6. Name and Address of Current Registered Agent AHERN, FRED L JR 2215 SOUTH THIRD STREET STE. 201 JACKSONVILLE BEACH, FL 32250

**DO NOT WRITE
IN THIS SPACE**

8. 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 (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**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AHERN, FRED L JR 2215 SOUTH THIRD STREET JACKSONVILLE BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST AHERN, SR. F 2215 S. 3RD STREET JACKSONVILLE BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000288676
04/05/05-80018-024 150.00

**DO NOT WRITE
IN THIS SPACE**

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 empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/05 904-241-4355
Date Daytime Phone #