

04/08/2005 16:43 FAX 5616500665

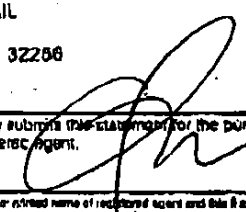
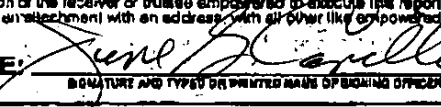
GUNSTER YOAKLEY

Mar 29 2005 9:04AM JAN HOFFMAN/ RE/MAX COAST

FILED
Apr 19, 2005 8:00 am
Secretary of State

04-19-2005 90376 044 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000063707					
1. Entity Name JANET ELIZABETH HOFFMAN, P.A.					
Principal Place of Business 1805 WINDJAMMER LANE SAINT AUGUSTINE, FL 32084 US			Mailing Address 1805 WINDJAMMER LANE SAINT AUGUSTINE, FL 32084 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
5. Name and Address of Current Registered Agent CRABTREE, R. R. 8375 DIXIE LANE SUITE 401 JACKSONVILLE, FL 32206			7. Name and Address of New Registered Agent Name: GUNSTER, YOAKLEY & STEWART, P.A. Street Address (P.O. Box Number is Not Acceptable): CHRISTOPHER KAMMERER 777 South Flagler Drive, Ste 500 EAST City: WEST PALM BEACH FL 33401		
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:  DATE: 4/6/05					
SIGNATURE: _____ (NOTE: Registered Agent signature required when registering)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE	VDP	☐ Delete			
NAME	HOFFMAN, JANET E				
STREET ADDRESS	1805 WINDJAMMER LANE				
CITY-ST-ZIP	SAINT AUGUSTINE, FL 32084				
TITLE	ST	☐ Delete			
NAME	CARILLI, JUNE G				
STREET ADDRESS	8420 ALDERMAN RD				
CITY-ST-ZIP	JACKSONVILLE, FL 32211				
TITLE	V	☐ Delete			
NAME	HOFFMAN, KELLY M				
STREET ADDRESS	1805 WINDJAMMER LANE				
CITY-ST-ZIP	SAINT AUGUSTINE, FL 32084				
TITLE	V	☐ Delete			
NAME	HOFFMAN, KATHRYN A				
STREET ADDRESS	1805 WINDJAMMER LANE				
CITY-ST-ZIP	SAINT AUGUSTINE, FL 32084				
TITLE		☐ Delete			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ Delete			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE		☐ Change ☐ Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ Change ☐ Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ Change ☐ Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(c), 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:  DATE: 4/12/05 904/823-1333					
SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR					

40061406

03242005 Chg-P CR2E034 (10/03)

4. FEI Number 69-9286031 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee RequiredFILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$350.009. Election Campaign Financing
Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VDP ☐ Delete
 NAME HOFFMAN, JANET E
 STREET ADDRESS 1805 WINDJAMMER LANE
 CITY-ST-ZIP SAINT AUGUSTINE, FL 32084

TITLE ST ☐ Delete
 NAME CARILLI, JUNE G
 STREET ADDRESS 8420 ALDERMAN RD
 CITY-ST-ZIP JACKSONVILLE, FL 32211

TITLE V ☐ Delete
 NAME HOFFMAN, KELLY M
 STREET ADDRESS 1805 WINDJAMMER LANE
 CITY-ST-ZIP SAINT AUGUSTINE, FL 32084

TITLE V ☐ Delete
 NAME HOFFMAN, KATHRYN A
 STREET ADDRESS 1805 WINDJAMMER LANE
 CITY-ST-ZIP SAINT AUGUSTINE, FL 32084

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
 NAME
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TITLE ☐ Change ☐ Addition
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR

DATE

TELEPHONE