

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000065340

**FILED**  
**Apr 10, 2005**  
**Secretary of State**

**Entity Name:** SAVICH REPORTING SERVICES, INC.

**Current Principal Place of Business:**

220 E MADISON STREET  
STE 1150  
TAMPA, FL 33602 US

**New Principal Place of Business:**

707 NORTH FRANKLIN STREET  
SIXTH FLR - TAMPA THEATRE BLDG  
TAMPA, FL 33602 US

**Current Mailing Address:**

P. O. BOX 172418  
TAMPA, FL 336720418 US

**New Mailing Address:**

**FEI Number:** 59-3265580

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SAVICH, KATHY  
220 E MADISON STREET  
STE 1150  
TAMPA, FL 33602 US

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

SAVICH, KATHY  
707 NORTH FRANKLIN STREET  
SIXTH FLR - TAMPA THEATRE BLDG  
TAMPA, FL 33602 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: KATHY SAVICH

04/10/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SAVICH, KATHY  
Address: 220 E MADISON STREET STE 1150  
City-St-Zip: TAMPA, FL 33602

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SAVICH, KATHY  
Address: 707 NORTH FRANKLIN STREET, 6TH FLR  
City-St-Zip: TAMPA, FL 33602

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: KATHY SAVICH

PD

04/10/2005

Electronic Signature of Signing Officer or Director

Date