

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000086068

FILED
Apr 26, 2005
Secretary of State

Entity Name: J. NORMAN GIOVENCO, C.P.A., P.A.

Current Principal Place of Business:

110 S. HOOVER BLVD.
SUITE 110
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

110 S. HOOVER BLVD.
110
TAMPA, FL 33609

New Mailing Address:

FEI Number: 65-0541183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIOVENCO, J. NORMAN
100 SOUTH ASHLEY DRIVE
#1650
TAMPA, FL 33672 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: GIOVENCO, J. NORMAN
Address: 110 S. HOOVER BLVD., #110
City-St-Zip: TAMPA, FL 33609

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: J. NORMAN GIOVENCO

PRES

04/26/2005

Electronic Signature of Signing Officer or Director

_____ Date