

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000093235

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: WOLLMAN, GEHRKE & SOLOMON, P.A.

## Current Principal Place of Business:

5129 TAMIAMI TR N  
1  
NAPLES, FL 34103 US

## Current Mailing Address:

5129 TAMIAMI TR N  
1  
NAPLES, FL 34103 US

FEI Number: 65-0545582

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOLLMAN, EDWARD E  
5129 TAMIAMI TRAIL N  
SUITE 1  
NAPLES, FL 34103 US

## New Principal Place of Business:

5129 CASTELLO DRIVE  
1  
NAPLES, FL 34103 US

## New Mailing Address:

5129 CASTELLO DRIVE  
1  
NAPLES, FL 34103 US

## Name and Address of New Registered Agent:

WOLLMAN, EDWARD E  
5129 CASTELLO DRIVE  
SUITE 1  
NAPLES, FL 34103 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: EDWARD E. WOLLMAN

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WOLLMAN, EDWARD E  
Address: 5129 CASTELLO DR  
City-St-Zip: NAPLES, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: WOLLMAN, EDWARD E  
Address: 5129 CASTELLO DR, STE. 1  
City-St-Zip: NAPLES, FL 34103 US

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: EDWARD E. WOLLMAN

DP

04/29/2005

Electronic Signature of Signing Officer or Director

Date