

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

U. Registrar  
APR 27 2005

FILED

05 APR 27 PM 3:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



04202005 No Chg-P CR2E034 (10/03)

4. FEI Number  
65-0586008

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

LAJOIE, JOHN T S  
2075 CENTRE POINTE BLVD  
TALLAHASSEE, FL 32308

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 title 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	S
NAME	LA JOIE, JOHN
STREET ADDRESS	2075 CENTRE POINTE BLVD
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	VD
NAME	CONWAY, MICHAEL
STREET ADDRESS	2075 CENTRE POINTE BLVD
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	P
NAME	CAMPERLENGO, FRANK
STREET ADDRESS	7360 BRYAN DAIRY RD., STE. 200
CITY-ST-ZIP	LARGO, FL 33777
TITLE	V
NAME	GALLAWAY, JIM
STREET ADDRESS	7360 BRYAN DAIRY RD., STE. 200
CITY-ST-ZIP	LARGO, FL 33777
TITLE	V
NAME	GARRITY, RYAN
STREET ADDRESS	2075 CENTRE POINTE BLVD.
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	V
NAME	LAROSA, MIKHAEL
STREET ADDRESS	7360 BRYAN DAIRY RD.
CITY-ST-ZIP	LARGO, FL 33777

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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:

Michael Larosa, as VP  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/05

Date

727-549-3300

Daytime Phone #