


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 12, 2005 8:00 am
Secretary of State

09-12-2005 90001 039 ***150.00

DOCUMENT # P95000055516		
1. Entity Name AUDIT TECH OF CENTRAL FLA, INC.		

Principal Place of Business 5174 LAZY OAKS DR WINTER PARK, FL 32792 US	Mailing Address 5174 LAZY OAKS DR WINTER PARK, FL 32792 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent	
RAY, WILLIAM J 5174 LAZY OAKS DR WINTER PARK, FL 32792	

07182005	Chg-P	CR2E034 (10/03)
4. FEI Number 59-3305370		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P RAY, WILLIAM J 5174 LAZY OAKS DR WINTER PARK, FL 32792 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 an alter like empowered.

SIGNATURE: _____ **9-1-05**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

ATTACHMENT

50066312
P95000055516

9/6/05

DEAR MR TONER,

- I DO NOT KNOW WHY

THIS WAS RETURNED TO YOU
(THE ADDRESS IS CORRECT)

- I WILL BE ON VACATION
(MAIL HOLDING) TIL AFTER
9/23/05 - MAYBE WANT AND
MAIL OUT ANY INFO AFTER
THAT DATE

THANK YOU FOR YOUR HELP

BILL RAY
PRESIDENT

ATTACHMENT

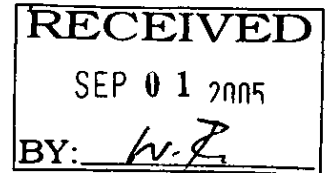


50066312

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 18, 2005 ✓



AUDIT TECH OF CENTRAL FLA, INC.
5174 LAZY OAKS DR
WINTER PARK, FL 32792 US

SUBJECT: ~~AUDIT TECH OF CENTRAL FLA, INC.~~
Ref. Number: P95000055516

Thank you for your correspondence of July 8, 2005, which has been forwarded to me for response.

The fee to file the enclosed profit annual report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner
Senior Section Administrator

Letter Number: 305A00047035