## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P95000055556

1. Entity Name THOMAS P. O'CONNELL, P.A.



Principal Place of Business

600 S. AUDREWS AVE STE 407 FORT LAUDERDALE, FL 33301 U Mailing Address

600 S. AUDREWS AVE STE 407 FORT LAUDERDALE, FL 33301

US

### FILED Jul 08, 2005 08:00 AM Secretary of State



#### DO NOT WRITE IN THIS SPACE

07052005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For Not Applied For N

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

O'CONNELL, THOMAS P 600 S. AUDREWS AVE. STE 407 FORT LAUDERDALE, FL 33301

# 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 of printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE					
		9. Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD O'CONNELL, THOMAS P 600 S. AUDREWS AVE. STE 407 FORT LAUDERDALE, FL 33301		· · · · ·		U00000371618 07/09/05-80012-004 558.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP				· <u>.</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental reports true and accurate and that my signature shall have those and effect as if made under cath; that I am an officer or director of the corporation or the receiver or typice improvemed 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 eachess, with all other like empowered.					