


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000075945
1. Entity Name
VER PLOEG & LUMPKIN, P.A.



Principal Place of Business 100 SE 2ND ST. SUITE 2150 MIAMI, FL 33131 US	Mailing Address 100 SE 2ND ST. SUITE 2150 MIAMI, FL 33131 US
---	---

DO NOT WRITE IN THIS SPACE



01122005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0615033	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VER PLOEG, BRENTON N ESQ.
100 SE 2ND ST.
SUITE 2150
MIAMI, FL 33131

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**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 NAME STREET ADDRESS CITY-ST-ZIP	DPT VER PLOEG, BRENTON N 100 SE SECOND STREET, STE 2150 MIAMI, FL 331312154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILLIAMS, ANTHEA E 100 SE SECOND STREET, STE 2150 MIAMI, FL 331312154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV LUMPKIN, R H 100 SE SECOND STREET, STE 2150 MIAMI, FL 331312154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAV MARINO, STEPHEN A JR 100 SE SECOND STREET, STE 2150 MIAMI, FL 331312151
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAV PARSONS, EILEEN L 100 SE SECOND ST STE 2150 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAV MAZER, JASON S 100 SE SECOND ST STE 2150 MIAMI, FL 33131

U00000275224
03/24/05-80045-003 150.00

**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: Brenton N. Ver Ploeg PRES & DIRECTOR Date: March 10, 2005 Daytime Phone #: 305 571-3996

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRENTON N. VER PLOEG