

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000081830

Entity Name: NAN B. BOLZ, P.A.

FILED
Feb 02, 2005
Secretary of State

Current Principal Place of Business:

5 HARVARD CIRCLE
SUITE 100
W. PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

5 HARVARD CIRCLE
SUITE 100
W. PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-0614177

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLZ, NAN B
5 HARVARD CIRCLE, SUITE 100
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BOLZ, NAN B
Address: 5 HARVARD CIRCLE, ST. 100
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D () Delete
Name: BOLZ, CHARLES
Address: 5 HARVARD CIRCLE ST 103
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NAN B. BOLZ

D

02/02/2005

Electronic Signature of Signing Officer or Director

Date