


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 10, 2005 8:00 am**  
**Secretary of State**

03-10-2005 90161 001 \*\*\*150.00

<b>DOCUMENT # P95000092728</b> 1. Entity Name MARSHALL, BURKETT & ASSOCIATES, INC.	
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Principal Place of Business 4355 HANCOCK BRIDGE PKWY. NORTH FT. MYERS, FL 33903	Mailing Address 4355 HANCOCK BRIDGE PKWY. NORTH FT. MYERS, FL 33903
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**50024600**



03022005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0616208	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  BURKETT, WAYNE D 4355 HANCOCK BRIDGE PKWY. NORTH FT. MYERS, FL 33903	<b>DO NOT WRITE IN THIS SPACE</b>
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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

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BURKETT, WAYNE D 2817 SW 31ST LANE CAPE CORAL, FL 33914
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BURKETT, LEOTA R 2817 SW 31ST LANE CAPE CORAL, FL
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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:** Wayne D Burkett **3/8/05** 239/557-1411  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone