

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000000527	
1. Entity Name DEEDCO CENTER COURT, INC.	



Principal Place of Business 105 SE 12 AVENUE HOMESTEAD, FL 33030 FL	Mailing Address 105 SE 12 AVENUE HOMESTEAD, FL 33030 FL
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

REGISTERED AGENTS OF FLORIDA, LLC  
100 SOUTHEAST SECOND STREET, #2900  
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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 7, 2005**

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	D VICKERS, MILTON D 141 N.E. 3RD AVE., SUITE 500 MIAMI, FL 33132 <i>- Delete</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, LILLIE M 1180 NW 50 STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>McKenzie, Wilfred</i> 3280 N.W. 48 Terrace D Miami, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE  
IN THIS SPACE

07/12/05--01033--002 \*\*\$550.00

07/12/05--01033--001 \*\*\$550.00

07/12/05--01033--002 \*\*\$8.75

07/12/05--01033--002

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: Lillie M Williams 6/30/05 305-577-8080  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED  
05 JUL -7 AM 11:41  
SECRET  
TALLAHASSEE, FL 32301



06242005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0665105	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	