

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000019413

FILED
Mar 01, 2005
Secretary of State

Entity Name: GOLDMAN FELCOSKI & STONE, P.A.

Current Principal Place of Business:

745 12TH AVE S SUITE 101
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

745 12TH AVE S SUITE 101
NAPLES, FL 34102

New Mailing Address:

FEI Number: 65-0648376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDMAN, ROBERT W
4933 NORTH TAMiami TRAIL
SUITE 203
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

GOLDMAN, ROBERT W
745 12TH AVENUE SOUTH
SUITE 101
NAPLES, FL 34102 US

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:

03/01/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: GOLDMAN, ROBERT W
Address: 172 CAJEPUT DRIVE
City-St-Zip: NAPLES, FL 34108

Title: DS () Delete
Name: STONE, BRUCE M
Address: 6475 SW 92ND ST
City-St-Zip: MIAMI, FL 33156

Title: DV () Delete
Name: FELCOSKI, BRIAN J
Address: 8491 SW 102ND ST.
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ROBERT W. GOLDMAN

DPT

03/01/2005

Electronic Signature of Signing Officer or Director

Date