## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 02, 2005 08:00 AM Secretary of State **DOCUMENT # P96000035766** 1. Entity Name MICHAEL P. WALSH, P.A. Principal Place of Business Mailing Address 501 S FLAGLER DR **501 S FLAGLER DR** STE 306 WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401 04252005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 65-0666586 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DUBOIS, SILVIA R DO NOT WRITE 505 S FLAGLER DR **SUITE 1330** IN THIS SPACE WEST PALM BEACH, FL 33401 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10, TITLE 1/00000357146 05/04/05-80062-011 150.00 NAME WALSH, MICHAEL P 501 SO FLAGLER DRIVE STE 306 STREET ADDRESS WEST PALM BEACH, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP IME NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this tilid 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 land 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 trusted 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 pitter like empowered.

SIGNATURE: <u>U</u>

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZI?

561-655-5569