## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000061776

Entity Name: WILLIAM WIENER, P.A.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8286 WESTERN WAY CIRCLE SUITE C-2

JACKSONVILLE, FL 32256 US

Current Mailing Address: New Mailing Address:

8286 WESTERN WAY CIRCLE SUITE C-2 JACKSONVILLE, FL 32256 US

FEI Number: 65-0689153 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WIENER, WILLIAM 3245 DOCKSIDE DRIVE COOPER CITY, FL 33026 US WIENER, WILLIAM 8286 WESTERN WAY CIRCLE SUITE C-2 JACKSONVILLE, FL 32256 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: 04/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition WIENER, WILLIAM WIENER, WILLIAM PSD Name: Name: 3245 DOCKSIDE DRIVE 8286 WESTERN WAY CIRCLE C-2 Address: Address: City-St-Zip: COOPER CITY, FL 33026 City-St-Zip: JACKSONVILLE, FL 32256

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: WILLIAM WIENER PA PSD 04/28/2005