

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 21, 2005 08:00 AM
Secretary of State**

DOCUMENT # P96000084780

1. Entity Name
FARRIS ENTERPRISES, INC.



Principal Place of Business
**3570 ROLLING TRAIL
PALM HARBOR, FL 34684**

Mailing Address
**3570 ROLLING TRAIL
PALM HARBOR, FL 34684**



03182005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3413683

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MYERS, ROBERT J
1135 PASADENA AVENUE SOUTH
SUITE 140
ST PETERSBURG, FL 33707**

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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 \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PS
NAME	FARRIS, PETER
STREET ADDRESS	3570 ROLLING TRAIL
CITY-ST-ZIP	PALM HARBOR, FL 34684
TITLE	VT
NAME	FARRIS, JUDY
STREET ADDRESS	3570 ROLLING TRAIL
CITY-ST-ZIP	PALM HARBOR, FL 34684
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/21/05-80007-020 150.00

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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)(f), 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 officer 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: *Peter D. Farris* **PETER D. FARRIS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/05 727-787-1563

Date

Daytime Phone #