

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000085048

FILED  
Jan 28, 2005  
Secretary of State

Entity Name: PEACOCK & WIENER, P.A.

## Current Principal Place of Business:

1408 N WESTSHORE BLVD  
SUITE 800  
TAMPA, FL 33607 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 21483  
TAMPA, FL 336221483 US

## New Mailing Address:

FEI Number: 59-3407282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PEACOCK, SANDRA L.  
1408 N WESTSHORE BLVD  
SUITE 800  
TAMPA, FL 33607 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: PEACOCK, SANDRA  
Address: 1408 N WESTSHORE BLVD  
City-St-Zip: TAMPA, FL 33607

Title: DV ( ) Delete  
Name: WIENER, MICHAEL J  
Address: 1408 N WESTSHORE BLVD  
City-St-Zip: TAMPA, FL 33607 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SANDRA L. PEACOCK

P

01/28/2005

Electronic Signature of Signing Officer or Director

Date