

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90080 043 ***150.00

DOCUMENT # P96000103227

1. Entity Name
GARCIA & ORTIZ, P.A.



Principal Place of Business
**888 EXECUTIVE CENTER DRIVE WEST
SUITE 101
ST. PETERSBURG, FL 33703-2746**

Mailing Address
**888 EXECUTIVE CENTER DRIVE WEST
SUITE 101
ST. PETERSBURG, FL 33703-2746**

40014758



01062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3410694

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ORTIZ, LOUIS P
888 EXECUTIVE CENTER DRIVE WEST
SUITE 101
ST. PETERSBURG, FL 33703-2746 33702**

**DO NOT WRITE
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 NAME STREET ADDRESS CITY - ST - ZIP	DVP GARCIA, LUIS 888 EXECUTIVE CENTER DRIVE WEST STE 101 ST. PETERSBURG, FL 33702
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP ORTIZ, LOUIS P 888 EXECUTIVE CENTER DRIVE WEST STE 101 ST. PETERSBURG, FL 33702
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST TONDREAULT, STEPHEN H. 888 EXECUTIVE CENTER DR W., SUITE 101 ST. PETERSBURG, FL 33702
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD DEL RIO, EDDIE 17402 HIRLEAH HIALEAH ODESSA, FL 33556
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD WATERS, JAMES P 2615 W. GRAND RESERVE TOTT'S OLD COACHMAN #506 CIRCLE, # 318 CLEARWATER, FL 33765 33759
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD KREIS, CLAYTON 616 ADDISON DRIVE N.E. SAINT PETERSBURG, FL 33716

**DO NOT WRITE
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)(i), 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 receiver 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/05

Date

727-574-1245

Daytime Phone #

ATTACHMENT

40014758
P96000103227

Add 1 director as follows:

C. Burt Linthicum
8409 Twin Lakes Blvd.
Tampa, FL 33614-1727