

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000104258

Entity Name: COONER & ASSOCIATES, INC.

FILED  
Apr 22, 2005  
Secretary of State

**Current Principal Place of Business:**

3900 COLONIAL BLVD  
SUITE 4  
FT. MYERS, FL 33912 US

**New Principal Place of Business:**

5670 ZIP DRIVE  
FT. MYERS, FL 33905 US

**Current Mailing Address:**

3900 COLONIAL BLVD  
SUITE 4  
FT. MYERS, FL 33912 US

**New Mailing Address:**

5670 ZIP DRIVE  
FT. MYERS, FL 33905 US

FEI Number: 65-0718068

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

COONER, JEFFREY C  
16119 FLAGG POND LANE  
N FT MYERS, FL 33917 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: PSTD ( ) Delete  
Name: COONER, JEFFREY C  
Address: 16119 FLAGG POND LANE  
City-St-Zip: N FT MYERS, FL 33917

Title: VP ( ) Delete  
Name: AMANN, ROBERT G  
Address: 6352 EMERALD PINE CIRCLE  
City-St-Zip: FORT MYERS, FL 33912

**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 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: JEFFREY C COONER

PSTD

04/22/2005

Electronic Signature of Signing Officer or Director

Date