

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000019801

Entity Name: SZF, INC.

FILED
Jan 13, 2005
Secretary of State

Current Principal Place of Business:

800 N MAGNOLIA AVE
SUITE 1500
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

800 N MAGNOLIA AVE
SUITE 1500
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: 59-3502015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAN MEAD SERVICES, LLC
800 N. MAGNOLIA AVENUE
SUITE 1500
ORLANDO, FL 32803 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: ZIMMERMAN, SEEMA
Address: 18 COVENTRY DRIVE GREENLEFE
City-St-Zip: HAINES CITY, FL 33844

Title: V () Delete
Name: ZIMMERMAN, STEVEN J
Address: 151 FAWSETT RD E
City-St-Zip: WINTER PARK, FL 32789

Title: S () Delete
Name: TITEN, LISA
Address: 10409 GREEN HEDGES DR
City-St-Zip: TAMPA, FL 33626

Title: T () Delete
Name: WEISMAN, ARLENE LOU
Address: 171 E MARION WAY
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SEEMA ZIMMERMAN

P

01/13/2005

Electronic Signature of Signing Officer or Director

Date