## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 22, 2005 08:00 AM Secretary of State

1. Entity Nar	MENT # P97000601	10		Secretary of Stat		
*	ce of Business	Mailing Address				
PMB 359 411 WALNUT STREET 411 WALNUT STREET GREEN COVE SPRINGS, FL 32043 GREEN COVE SPRINGS,			2043			<b> [[</b> ]
		IN THE ORA	<b>AF</b>	02162005 No Chg-P	CR2E034 (10/03)	
	O NOT WRITE	IN THIS SPA	<b>UE</b>	4. FEI Number 59-3456749	Applied	
				5. Certificate of Status Desire	Not Apple 8.75 Additional	
1- 1-11	5. Name and Address of Current Re	gistered Agent	T	a octimode of diama besite	Pee riequired	
UNIT 11-2	LARRY R BT LUCIE BLVD			DO NOT V IN THIS S	NRITE	
	e named entity submits this statement for thations of registered agent.	e purpose of changing its register	red office or register	ed agent, or both, in the State of	Florida. I am familiar with, and a	iccept
SIGNATURE.	Signature, typed or printed name of registered agent and	the Happicable. (NOTE Register	ed Agent signature required	when reinstating)	DATE	-
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Fina Trust Fund Contribution.		00 May Be ad to Fees		
10.	OFFICERS AND DIF	ECTORS	alaki Hilini dik	gi, is si sa in	www.j.cj.cj.yas.asyggegga.trib.co.d.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IMHOFF, LARRY R 411 WALNUT ST, PMB 359 GREEN COVE SPRINGS, FL 3204	3			7:0239032 35+80026-015 7:32	<b>7</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT V		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS S	PACE	
TITLE NAME STREET ADDRESS CITY - ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby of indicated of the cor	certify that the information supplied with this on this report or supplemental report is truporation or the receiver or trustee empower or or an attachment with a suddens, with	s filing does not qualify for the exe e and accurate and that my signa red to execute this report as requi	mption stated in Sector shall have the street by Chapter 607,	tion 119.07(3)(i), Florida Statute ame legal effect as if made under Florida Statutes, and that my na	s. I further certify that the Informat er oath; that I am an officer or dire ame appears in Block 10 or Block	tion ector

LA Larry R Imhose 2-11-05 772-295-4384