

FILED
Mar 14, 2005 08:00 AM
Secretary of State

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P97000061648		
1. Entity Name STEVEN C. SESSA, P.A.		
Principal Place of Business 1210 N OLIVE AVENUE WEST PALM BEACH, FL 33401		Mailing Address 1210 N OLIVE AVENUE WEST PALM BEACH, FL 33401
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SESSA, STEVEN C ESQUIRE 1210 N OLIVE AVENUE WEST PALM BEACH, FL 33401		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 changing g)		
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	DPTS	
NAME	SESSA, STEVEN C	
STREET ADDRESS	1210 N OLIVE AVENUE	
CITY - ST - ZIP	WEST PALM BEACH, FL 33401	
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: 		3/14/05 561-687-0499
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #



03102005 No Chg-P CR2E034 (10/03)

4. FEI Number 85-0767455	Applied For ☒ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

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03/14/05-80037-017 150.00

**DO NOT WRITE
IN THIS SPACE**