2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2005
Secretary of State

DOCUMENT# P97000070887

Entity Name: MARLOWE & MCNABB, P.A.

Current Principal Place of Business:

324 S HYDE PARK AVE
STE 210
TAMPA, FL 33606 US

New Principal Place of Business:

1560 WEST CLEVELAND STREET
TAMPA, FL 33606 US

Current Mailing Address:

324 S HYDE PARK AVE
STE 210
TAMPA, FL 33606 US

New Mailing Address:

1560 WEST CLEVELAND STREET
TAMPA, FL 33606 US

FEI Number: 59-3463307 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARLOWE, STEPHEN D
324 S HYDE PARK AVE
STE 210
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

MARLOWE, STEPHEN D
1560 WEST CLEVELAND STREET
TAMPA, FL 33606 US

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: STEPHEN D. MARLOWE 02/02/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: MARLOWE, STEPHEN D
Address: 324 S HYDE PARK AVE STE 210
City-St-Zip: TAMPA, FL 33606

Title: VD ( ) Delete
Name: MCNABB, JOSEPH V
Address: 324 S HYDE PARK AVE STE 210
City-St-Zip: TAMPA, FL 33606

Title: S ( ) Delete
Name: MARLOWE, CONSTANCE M
Address: 324 S HYDE PARK AVE STE 210
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: MARLOWE, STEPHEN D
Address: 1560 WEST CLEVELAND STREET
City-St-Zip: TAMPA, FL 33606

Title: VD (X) Change ( ) Addition
Name: MCNABB, JOSEPH V
Address: 1560 WEST CLEVELAND STREET
City-St-Zip: TAMPA, FL 33606

Title: S (X) Change ( ) Addition
Name: MARLOWE, CONSTANCE M
Address: 1560 WEST CLEVELAND STREET
City-St-Zip: TAMPA, FL 33606

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: CONSTANCE M. MARLOWE S 02/02/2005
Electronic Signature of Signing Officer or Director Date