

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000075308

FILED
Apr 22, 2005
Secretary of State

Entity Name: KATHRYN P. FRASER, PH.D., P.A.

Current Principal Place of Business:

8 KASLO CT
PALM COAST, FL 32164 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 10258
DAYTONA BEACH, FL 32120 US

New Mailing Address:

FEI Number: 59-3454273 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRASER, KATHRYN P PH.D.
8 KASLO CT
PALM COAST, FL 32164 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: D () Delete
Name: FRASER, KATHRYN P PH.D.
Address: 184 WESTWOOD DRIVE
City-St-Zip: DAYTONA BEACH, FL 32119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: FRASER, KATHRYN P PH.D.
Address: 8 KASLO COURT
City-St-Zip: DAYTONA BEACH, FL 32164

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: KATHRYN P. FRASER, PH.D.

Electronic Signature of Signing Officer or Director

DR.

04/22/2005

_____ Date