

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000091828

Entity Name: FISHERS TRUST, INC.

FILED  
Apr 28, 2005  
Secretary of State

## Current Principal Place of Business:

23452 QUARAR BLVD  
PORT CHARLOTTE, FL 33980

## New Principal Place of Business:

23452 QUASAR BLVD  
PORT CHARLOTTE, FL 33980

## Current Mailing Address:

23452 QUASAR BLVD  
PORT CHARLOTTE, FL 33980

## New Mailing Address:

FEI Number: 65-0792873      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHELM, PAUL R JR.  
3044 CARING WAY  
PORT CHARLOTTE, FL 33952      US

## Name and Address of New Registered Agent:

SCHELM, PAUL R JR.  
23460 QUASAR BLVD  
PORT CHARLOTTE, FL 33980      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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/28/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SCHELM, PAUL R  
Address: 11423 S.W. THORNTON AVE  
City-St-Zip: ARCADIA, FL 34267

Title: VPD ( ) Delete  
Name: SCHELM, PAUL R JR  
Address: 3044 CARING WAY  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: ST ( ) Delete  
Name: VACOPOULOS, DEBORAH L  
Address: 21463 KENELM AVENUE  
City-St-Zip: PORT CHARLOTTE, FL 33952

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SCHELM, PAUL R  
Address: 11423 S.W. THORNTON AVE  
City-St-Zip: ARCADIA, FL 34267 US

Title: VPD (X) Change ( ) Addition  
Name: SCHELM, PAUL R JR  
Address: 23460 QUASAR BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33980

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: DEBORAH L VACOPOULOS

ST

04/28/2005

Electronic Signature of Signing Officer or Director

Date