

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 25, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000094145 1. Entity Name SAMUEL A. MUTCH, P.A.	
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Principal Place of Business 2114 NW 40TH TERR STE A-1 GAINESVILLE, FL 32606	Mailing Address 2114 NW 40TH TERR STE A-1 GAINESVILLE, FL 32606
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07072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3476449	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MUTCH, SAMUEL A 2114 NW 40TH TERR STE A1 GAINESVILLE, FL 32606
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MUTCH, SAMUEL A 2114 NW 40TH TERR STE A-1 GAINESVILLE, FL 32606
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UN00011377123 08/25/05-80007-008 150.00 DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Samuel A. Mutch 7/7/05 (352) 378-5599
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #