## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## FILED May 02, 2005 08:00 AM Secretary of State

1. Entity Nan	MENT # P97000096 ssociates, corp.	744				Secreta	ary of State
Principal Place 5219 ABBE TAMPA, FL		Mailing Address PO BOX 47594 TAMPA, FL 33647	7			•	
C	OO NOT WRITE		SPAC	<b>CE</b>		Chg-P CR2	E034 (10/03)  Applied For Not Applicable \$8.75 Additional Fee Required
HURST, D 5219 ABB TAMPA, F	EY PARK AVE	egistered Agent	admini izi.			OT WRIT S SPAC	
the obligated signature.	e named entity submits this statement for tions of registered agent.  Somewie, typed of printed name of registered agent and the control of t	d title if applicable.  9. Election Cal	TNÓTE: Registerec	Agent signature required		e State of Florida. I a	
10,	OFFICERS AND D		<del> ,</del>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HURST, DUDLEY 5219 ABBEY PARK AVE TAMPA, FL 33647		e e e e e e e e e e e e e e e e e e e	Terriber green	(1570)	00000357063 4/05-80059	
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12. I hereby of indicated of the corchanged,	certify that the information supplied with the on this report or supplemental report is to poration or the receiver or trustee embore or on an attachment with an address with an address.	nis filing does not qualifue and accurate and the vered to execute this repair the all other like empowers.	y for the exentral my signate port as require ered.	iption stated in Sec re shall have the s ed by Chapter 607	otion 119.07(3)(i), Floric ame legal effect as if m Florida Statutes; and t	da Statutes. I further of hade under oath; that hat my name appear	certify that the Information I am an officer or director in Block 10 or Block 11 if