2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000000784

Entity Name: GORMAN MIOTKE & ASSOCIATES, P.A

FILED Apr 25, 2005 Secretary of State

Entity Nun	iie. Gonwan wild the & Addociated	4, L. 77.		
Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
403	RTH STREET NORTH			
SAINT PET	ERSBURG, FL 33702 US			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
SUITE 403	RTH STREET NORTH RSBURG, FL 33702 US			
FEI Number:	59-3492425 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent	: Name and Address of N	Name and Address of New Registered Agent:	
9800 FOUR	OTKE & ASSOCIATES, P.A. RTH STREET NORTH, SUITE 403	SUITE 403	9800 FOURTH STREET NORTH, SUITE 403 SUITE 403	
SAINT PETERSBURG, FL 33702 US		SAINT PETERSBURG, F	SAINT PETERSBURG, FL 33702 US	
The above in the State	named entity submits this statement for t of Florida.	he purpose of changing its registered o	ffice or registered agent, or both,	
SIGNATURE: E. GORMAN			04/25/2005	
	Electronic Signature of Registered	Agent	Date	
Election Can	npaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PSTD () Delete GORMAN, ELLEN R 9800 FOURTH STREET NORTH, SUITE 403 SAINT PETERSBURG, FL 33704	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delete MIOTKE, JOHN C 9800 FOURTH STREET NORTH, SUITE 403 ST PETERSBURG, FL 33702	Title: () Name: Address: City-St-Zip:	Change () Addition	

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: E. GORMAN PSTD 04/25/2005