2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000004407

Entity Name: ADMINISTRATIVE PARTNERS, INC.

FILED Feb 18, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	NNEDY BLVD			
850 TAMPA, F	L 33602			
Current Mailing Address:			New Mailing Address:	
201 F KF	NNEDY BLVD			
850				
TAMPA, F				
FEI Number	: 59-3486128	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
STE 850	JSS NNEDY BLVD 'L 33602 US			
	e named entity s e of Florida.	submits this statement for the p	purpose of changing its registere	d office or registered agent, or both,
SIGNATU	RE:			
	Electron	ic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financing	Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	D () GACIO, SANDY 201 E KENNED TAMPA, FL 336	Y BLVD #850	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () SIMMONS, JOE 201 E KENNED TAMPA, FL 336	Y BLVD #850	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () DOUGLAS, DEE 201 E KENNED TAMPA, FL 336	Y BLVD #850	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () RILEY, RUSS 201 E KENNED TAMPA, FL 336		Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	D ()	Delete	Title:	() 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.

Address:

City-St-Zip:

SIGNATURE: JOE SIMMONS VP 02/18/2005

201 E KENNEDY BLVD #850

City-St-Zip: TAMPA, FL 33602

Address: