

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR 21 AM 11:52



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3500989	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

YOUNG, ROY C
225 S ADAMS STREET
STE 200
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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:

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE:

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SITTIG, BETTY J
STREET ADDRESS	3529 CASTLEBAR CIRCLE
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	S
NAME	SITTIG, RAYMOND C
STREET ADDRESS	3529 CASTLEBAR CIRCLE
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	D
NAME	YOUNG, ROY
STREET ADDRESS	225 S ADAMS ST. STE 200
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	D
NAME	YOUNG, ROSA MARIE
STREET ADDRESS	2436 ARVAK BRANCH BLVD.
CITY-ST-ZIP	TALLAHASSEE, FL 32309
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

700049350897
03/29/05--01039--003 **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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-17-05 850-893-4389
850 224-7191

RAYMOND C. SITTIG