2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

1. Entity Nam	MENT # P9800002847		Secretary or st	aı
4831 CLYDE	MORRIS BLVD	Mailing Address 4831 CLYDE MORRIS BLVD PORT ORANGE, FL 32119		
E	OO NOT WRITE I	Standard management of the standard standard standard standard standard standard standard standard standard st	04222005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For S9-3500153 Not Applied For Not Applicable \$8.75 Additional Fee Required	ie
2285 W. E	6. Name and Address of Current Regi N, CHARLES L EAU GALLIE BLVD, RNE, FL 32935	stered Agent	DO NOT WRITE IN THIS SPACE	
	tions of registered agent.		fice or registered agent, or both, in the State of Florida. I am familiar with, and accept	1
	Signature, typed or printed name of registered agent and tilk E NOWIII FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campalgn Financing Trust Fund Contribution.		
10.	OFFICERS AND DIRE	CTORS		\neg
TITLE NAME STREET AODRESS CITY-ST-ZIP	ROGERS, STEPHEN P 1892 JOYNER DR. DELTONA, FL 32725			-9.
TITLE NAME STREET ADDRESS CITY-ST-ZIP			UN0000327169 	
TITLE NAME STREET ADDRESS CITY+ST-ZIP			DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				
TITLE NAME STHEET ADDRESS CITY+ST-ZIP				
indicated of the cor	I on this report or supplemental report is true.	and accurate and that my signature si ad to execute this report as required by	on stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information shall have the same legal effect as if made under cath, that I am an officer or director by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if	1
SIGNAT	URE: SIGNATURE AND TYPED OR PRINTE	D NAME OF SIGNING OFFICER OR DIRECTOR	4-22-5 (326) 788-8285 Dale Daytime Phone #	: }
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