## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jul 05, 2005 08:00 AM DOCUMENT # P98000029905 Secretary of State FIRST PRO CORPORATION Principal Place of Business Mailing Address 7053 SALK AVE. 7053 SALK AVE. JACKSONVILLE, FL 32210 JACKSONVILLE, FL 32210 06302005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3501195 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent WALKER, JACKIE S DO NOT WRITE 7053 SALK AVENUE JACKSONVILLE, FL 32210 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. Lam 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 9. Election Campaign Financing \$5.00 May 8e FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Due by September 7, 2005 Added to Fees 10. OFFICERS AND DIRECTORS ППЦЕ WALKER, JACKIE S NAME STREET ADDRESS 7053 SALK AVENUE JACKSONVILLE, FL 32210 CITY-ST-ZIP TITLE U00000370788 NAME 07/05/05-80030-020 558.75 STREET ADDRESS CITY-SI-ZIP TITLE STREET ADDRESS DO NOT WRITE CRY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 of an attachment with an address, with all other like empowered.

SIGNATURE

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP