

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000062680

Entity Name: DRAPER AND BOYD, P.A.

FILED  
Feb 14, 2005  
Secretary of State

## Current Principal Place of Business:

298 LAWRENCE BLVD  
KEYSTONE HEIGHTS, FL 32656

## New Principal Place of Business:

210 SW NIGHTINGALE STREET  
KEYSTONE HEIGHTS, FL 32656

## Current Mailing Address:

PO BOX 1149  
KEYSTONE HEIGHTS, FL 32656

## New Mailing Address:

FEI Number: 59-3519085

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOYD, JERRY J  
298 LAWRENCE BLVD  
KEYSTONE HEIGHTS, FL 32656 US

## Name and Address of New Registered Agent:

BOYD, JERRY J  
210 SW NIGHTINGALE STREET  
KEYSTONE HEIGHTS, FL 32656 US

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.

SIGNATURE:

02/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BOYD, JERRY J III  
Address: 298 LAWRENCE BLVD  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: D ( ) Delete  
Name: BOYD, CATHERINE S  
Address: 298 LAWRENCE BLVD  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BOYD, JERRY J III  
Address: 210 SW NIGHTINGALE STREET  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: D (X) Change ( ) Addition  
Name: BOYD, CATHERINE S  
Address: 210 SW NIGHTINGALE STREET  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

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: CATHERINE S. BOYD

D

02/14/2005

Electronic Signature of Signing Officer or Director

Date