

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000083740

FILED
Jan 31, 2005
Secretary of State

Entity Name: DAVID A. WILLENS AND ASSOCIATES, P.A.

Current Principal Place of Business:

721 NE LAKEVIEW TERRACE
BOCA RATON, FL 33431 US

New Principal Place of Business:

2459 NW 62ND STREET
BOCA RATON, FL 33496 US

Current Mailing Address:

721 NE LAKEVIEW TERRACE
BOCA RATON, FL 33431 US

New Mailing Address:

2459 NW 62ND STREET
BOCA RATON, FL 33496 US

FEI Number: 65-0868927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLENS, DAVID A
721 NE LAKEVIEW TERRACE
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

WILLENS, DAVID A
2459 NW 62ND STREET
BOCA RATON, FL 33496 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:

01/31/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPTS () Delete
Name: WILLENS, DAVID A
Address: 721 NE LAKEVIEW TERRACE
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS (X) Change () Addition
Name: WILLENS, DAVID A
Address: 2459 NW 62ND STREET
City-St-Zip: BOCA RATON, FL 33496

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: DAVID A. WILLENS

P

01/31/2005

Electronic Signature of Signing Officer or Director

Date