

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000003308

FILED
Feb 16, 2005
Secretary of State

Entity Name: ADVOCATE TAXATION CONSULTING COMPANY

Current Principal Place of Business:

9229 DELEGATES ROW
SUITE 245
INDIANAPOLIS, IN 462403810 US

New Principal Place of Business:

2640 GOLDEN GATE PKWY
SUITE 205
NAPLES, FL 34105 US

Current Mailing Address:

9229 DELEGATES ROW
SUITE 245
INDIANAPOLIS, IN 462403810

New Mailing Address:

2640 GOLDEN GATE PKWY
SUITE 205
NAPLES, FL 34105 US

FEI Number: 35-2064456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEINERS, LOUIS M JR
200 AVIATION DRIVE
SUITE 2
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

MEINERS, LOUIS M JR
2640 GOLDEN GATE PKWY
SUITE 205
NAPLES, FL 34105 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: LOUIS M MEINERS JR

02/16/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MEINERS, LOUIS M JR
Address: 2598 L'ERMITAGE LANE
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LOUIS M MEINERS JR

P

02/16/2005

Electronic Signature of Signing Officer or Director

Date