

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000043533

Entity Name: IAN EDMONSON, P.A.

FILED
Jan 10, 2005
Secretary of State

Current Principal Place of Business:

432 MUIRFIELD DR
ATLANTIS, FL 33462

New Principal Place of Business:

334 S. OCEAN TRACE RD.
ST. AUGUSTINE, FL 32080

Current Mailing Address:

432 MUIRFIELD DR
ATLANTIS, FL 33462

New Mailing Address:

334 S. OCEAN TRACE RD.
ST. AUGUSTINE, FL 32080

FEI Number: 65-0919032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULLIN, JAMES G
2263 N.W. BOCA RATON BLVD.
SUITE 205
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

EDMONSON, IAN
334 S. OCEAN TRACE RD.
ST. AUGUSTINE, FL 32080 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: IAN EDMONSON

01/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: EDMONSON, IAN K
Address: 432 MUIRFIELD DRIVE
City-St-Zip: ATLANTIS, FL 33462

Title: D (X) Delete
Name: EDMONSON, MARY J
Address: 432 MUIRFIELD DRIVE
City-St-Zip: ATLANTIS, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: EDMONSON, IAN K
Address: 334 S. OCEAN TRACE RD.
City-St-Zip: ST. AUGUSTINE, FL 32080

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: IAN EDMONSON

PRES

01/10/2005

Electronic Signature of Signing Officer or Director

Date