

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000057584

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: LAW OFFICE OF SCOTT JOHNI, P.A.

## Current Principal Place of Business:

200 S. HOOVER BLVD.  
BLDG. 201, SUITE 190  
TAMPA, FL 33609 US

## New Principal Place of Business:

200 S. HOOVER BLVD.  
SUITE 190  
TAMPA, FL 33609 US

## Current Mailing Address:

PO BOX 24508  
TAMPA, FL 33603

## New Mailing Address:

PO BOX 24508  
TAMPA, FL 33623

FEI Number: 59-3586861

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNI, SCOTT T  
200 S. HOOVER BLVD.  
BLDG. 201, SUITE 190  
TAMPA, FL 33609 US

## Name and Address of New Registered Agent:

JOHNI, SCOTT T  
200 S. HOOVER BLVD.  
SUITE 190  
TAMPA, FL 33609 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:

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: JOHNI, SCOTT T  
Address: 200 S. HOOVER BLVD., BLDG. 201, STE 190  
City-St-Zip: TAMPA, FL 33609

Title: STD ( ) Delete  
Name: JOHNI, LISA M  
Address: 200 S. HOOVER BLVD., BLDG. 201, STE 190  
City-St-Zip: TAMPA, FL 33609

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: JOHNI, SCOTT T  
Address: 200 S. HOOVER BLVD., STE 190  
City-St-Zip: TAMPA, FL 33609

Title: STD (X) Change ( ) Addition  
Name: JOHNI, LISA M  
Address: 200 S. HOOVER BLVD., STE 190  
City-St-Zip: TAMPA, FL 33609

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: LISA M. JOHNI

STD

04/28/2005

Electronic Signature of Signing Officer or Director

Date