## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000069908

Entity Name: SOUTH OCEAN FIVE, INC.

CLERMONT, FL 34711

City-St-Zip:

FILED Jan 04, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 12728 LAKE RIDGE CIRCLE CLERMONT, FL 34711 **Current Mailing Address: New Mailing Address:** 12728 LAKE RIDGE CIRCLE CLERMONT, FL 34711 FEI Number: 59-3591231 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCLAFANI, VINCENT 12728 LAKE RIDGE CIRCLE CLERMONT, FL 34711 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition SCLAFANI, KATHLEEN Name: Name: 12728 LAKE RIDGE CIRCLE Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SCLAFANI, VINCENT Name: 12728 LAKE RIDGE CIRCLE Address: 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 Statutés. 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.

Ρ SIGNATURE: VINCENT SCLAFANI 01/04/2005