

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 18, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P99000079387**

1. Entity Name  
SPENCER SQUARE HOLDINGS, INC.



Principal Place of Business  
C/O MEREDITH REALTY, INC.  
1649 FORUM PLACE, STE. 11  
WEST PALM BEACH, FL 33401

Mailing Address  
C/O MEREDITH REALTY, INC.  
1649 FORUM PLACE, STE. 11  
WEST PALM BEACH, FL 33401



01142005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0953917

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

SHOFSTALL, WILLIAM G ESQ  
828 SQUIRE DRIVE  
WELLINGTON, FL 33414

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000183721  
01/20/05-80001-003 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	KIRBY, JOSEPH
STREET ADDRESS	1649 FORUM PLACE STE 11
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	SD
NAME	MEREDITH, SARA B
STREET ADDRESS	1649 FORUM PL STE 11
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	D
NAME	SCHAEFER, GRETCHEN L
STREET ADDRESS	854 VILLAGE RD
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
TITLE	D
NAME	NEMEC, JAMES TRUSTEE
STREET ADDRESS	2001 PALM BEACH LAKES #400
CITY-ST-ZIP	WEST PALM BEACH, FL 33409
TITLE	D
NAME	MEREDITH, G D
STREET ADDRESS	1649 FORUM PL STE 11
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Joseph Kirby* Joseph Kirby

Date

Daytime Phone #

1/11/05 561-689-8989