2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P99000095292 07-20-2005 90026 023 ***558.75 DONOGHUE WOOD & ASSOCIATES, INC. Principal Place of Business Mailing Address 1454C SR 580 1454C SR 580 50056328 DUNEDIN, FL 34698 DUNEDIN, FL 34698 3. Mailing Address 2. Principal Place of Business 332 SLINNER 332 SKINNER BUYD BLYD Suite, Apt. #, etc. Suite, Apt. #, etc. 07152005 Cha-P CR2E034 (10/03) City & State 4. FEI Number Applied For DUNEDIN DUVEDIA 59-3605237 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DONOGHUE, RICHARD Street Address (P.O. Box Number is Not Acceptable) 1454C SR 580 DUNEDIN, FL 34698 City Zip Code 8. The above named entity/supmits 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. RICHARD TOOKOG HUE 7-15-05 SIGNATURE Signature, typed or printed name of registared agent and title if applicable. 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Due by September 7, 2005 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Addition NAME DONOGHUE, RICHARD T NAME PICHARD T. DONOGHUE 332 SKINNER DUNEDIN E STREET ADDRESS 1454 C S.R. 580 STREET ADDRESS BUVD CITY-ST-ZIP DUNEDIN, FL 34698 CTY-ST-ZIP Change TITLE ☐ Delete TITLE 9V Addition WOOD, TODD NAME NAME TODD WOOD 332 SKINNER BLYD. 1454 C S.R. 580 STREET ADORESS STREET ADDRESS CITY-ST-ZIP **DUNEDIN, FL 34698** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MALAF STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DITY-ST-7P Change TITLE ☐ Delete ПΠЕ ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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. RICHARD T. DOLLOGHUE 7.15.05 727-735-0411 SIGNATURE:

FILED

Jul 20, 2005 8:00 am