

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 19, 2005 08:00 AM
Secretary of State

DOCUMENT # S17025 1. Entity Name FLEMINGS & COMPANY, P.A.																												
Principal Place of Business 3621 BERGER RD LUTZ, FL 33549 US	Mailing Address 3621 BERGER RD LUTZ, FL 33548 US																											
DO NOT WRITE IN THIS SPACE																												
01212005 No Chg-P CR2E034 (10/03) 4. FEI Number 59-3037098 Applied For Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																												
6. Name and Address of Current Registered Agent FLEMINGS, RICHARD D. 3621 BERGER RD LUTZ, FL 33549	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: <i>Richard Fleming</i> Signature, typed or printed name of registered agent and title if applicable. RICHARD FLEMINGS (NOTE: Registered Agent signature required when reinstating) 02-15-05 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																												
10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 85%;">D</td> </tr> <tr> <td>NAME</td> <td>FLEMINGS, RICHARD D.</td> </tr> <tr> <td>STREET ADDRESS</td> <td>3621 BERGER RD</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LUTZ, FL 33548</td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table> DO NOT WRITE IN THIS SPACE			TITLE	D	NAME	FLEMINGS, RICHARD D.	STREET ADDRESS	3621 BERGER RD	CITY-ST-ZIP	LUTZ, FL 33548																		
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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: <i>Richard Fleming</i> SIGNATURE AND TYPED OR PRINTED NAME OF SHARING OFFICER OR DIRECTOR RICHARD FLEMINGS 02-15-05 Date Daytime Phone #																												

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02/19/05-80009-001 150.00