## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S27748

Address:

City-St-Zip:

FILED Mar 24, 2005 Secretary of State

Entity Nar	me: BUMPUS	AND ASSOCIATES, INC.				
Current Principal Place of Business:			New Pri	New Principal Place of Business:		
603 FRON CELEBRA	T STREET TION, FL 3474	17				
Current Mailing Address:			New Ma	New Mailing Address:		
603 FRON CELEBRA	T STREET TION, FL 3474	17				
FEI Number:	59-3043397	FEI Number Applied For ( )	FEI Number Not A	pplicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
BUMPUS, 603 FRON CEEBRAT		' US				
	named entity s of Florida.	submits this statement for th	e purpose of changin	g its register	ed office or registered agent, or both,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent				Date		
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	Zip: CELEBRATION, FL 34747			Title: DP (X) Change ( ) Addition  Name: BUMPUS, DANIEL L.,  Address: 603 FRONT STREET  City-St-Zip: CELEBRATION, FL 34747		
Title: Name: Address: City-St-Zip:	D () BUMPUS, LIBB' 607 FRONT ST CELEBRATION		Title: Name: Address: City-St-Zi <sub>l</sub>	DV BUMPUS, 607 FRON CELEBRA		
Title: Name: Address: City-St-Zip:	RICHARDSON, 2419 TREASUR	Delete CHARLES T E ISLE DRIVE, A11 ARDENS, FL 33410	Title: Name: Address: City-St-Zi <sub>l</sub>	<b>ɔ</b> :	( ) Change ( ) Addition	
Title: Name:	( )	Delete	Title: Name:	DVST BUMPUS,	( ) Change (X) Addition CHRISTY J	

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.

Address:

City-St-Zip:

6027 WINDOVER DRIVE

ORLANDO, FL 32819

SIGNATURE: DANIEL L. BUMPUS DP 03/24/2005