


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2005 8:00 am
Secretary of State

01-31-2005 90052 013 ***150.00

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| DOCUMENT # S53239 1. Entity Name F.C.F., INC. |  |
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| Principal Place of Business 255 PILGRIM ROAD WEST PALM BEACH, FL 33405 US | Mailing Address 255 PILGRIM RD. WEST PALM BEACH, FL 33405 US |
|---|--|

40008730



01202005 No Chg-P CR2E034 (10/03)

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|---|-------------------------------|
| 4. FEI Number 65-0261501 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

HOTZ, FRANK E., III
3172 SE OVERBROOK DRIVE
PORT SAINT LUCIE, FL 34952

**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

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HOTZ, FRANK E., III 3172 S E OVERBROOK DR PORT SAINT LUCIE, FL 34952 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BERGERON MISSPELLED BERGERSON CHRISTINE C. LAST 255 PILGRAM RD NAME WEST PALM BEACH, FL |
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**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: Frank E. Hotz III 1/20/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #