


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 07, 2005 8:00 am**  
**Secretary of State**

07-07-2005 90079 010 \*\*\*550.00

<b>DOCUMENT # V21734</b>	
1. Entity Name <b>MIKEL W. CARPENTER, P.A.</b>	

Principal Place of Business <b>218 ANNIE STREET ORLANDO, FL 32806</b>	Mailing Address <b>218 ANNIE STREET ORLANDO, FL 32806</b>
--	--

2. Principal Place of Business <b>112 ANNIE ST.</b>	3. Mailing Address <b>112 ANNIE ST.</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



06302005 Chg-P CR2E034 (10/03)

4. FEI Number <b>59-3113424</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent <b>CARPENTER, MIKEL W 218 ANNIE ST. ORLANDO, FL 32806</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
--	--

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
---	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PV CARPENTER, MIKEL W. 218 ANNIE STREET ORLANDO, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>112 ANNIE ST.</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CARPENTER, MIKEL W. 218 ANNIE STREET ORLANDO, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>112 ANNIE ST.</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Mikel W Carpenter 6/30/04 407-843-3743  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



**ATTACHMENT**  
**2006/1891**  
**Division of Corporations**

**2005 Annual Report**

Listed below is the most recent information reported for the entity.  
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	V21734
Business Entity Name	MIKEL W. CARPENTER, P.A.
Original File Date	03/17/1992

FEI Number 59-3113424  
Principal Address 218 ANNIE STREET  
ORLANDO, FL 32806  
Mailing Address 218 ANNIE STREET  
ORLANDO, FL 32806  
Registered Agent MIKEL W CARPENTER  
218 ANNIE ST.  
ORLANDO, FL 32806

**Officer/Director Name And Address**

PV  
CARPENTER, MIKEL W.  
218 ANNIE STREET  
ORLANDO, FL

ST  
CARPENTER, MIKEL W.  
218 ANNIE STREET  
ORLANDO, FL

☐ After May 1 of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received.

If all of the above information is correct If you need to make changes to the