

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V26060

FILED
Jan 25, 2005
Secretary of State

Entity Name: BOGENSCHUTZ & DUTKO, P.A.

Current Principal Place of Business:

600 SOUTH ANDREWS AVE.
SUITE 500
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

600 SOUTH ANDREWS AVE
SUITE 500
FT. LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 65-0321608 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOGENSCHUTZ, J. DAVID
600 SOUTH ANDREWS AVE.
SUITE 500
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BOGENSCHUTZ, J. DAVI, D
Address: 600 SOUTH ANDREWS AVE, SUITE 500
City-St-Zip: FORT LAUDERDALE, FL

Title: D () Delete
Name: DUTKO, MICHAEL E.,
Address: 600 SOUTH ANDREWS AVE, SUITE 500
City-St-Zip: FORT LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: J. DAVID BOGENSCHUTZ

D

01/25/2005

Electronic Signature of Signing Officer or Director

Date