

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 29, 2005 8:00 am**  
**Secretary of State**

04-29-2005 90265 041 \*\*\*150.00

14010059



04042005 Chg-P CR2E034 (10/03)

4. FEI Number **59-3117860** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DOCUMENT # V28263**  
1. Entity Name  
**AKERMAN, SENTERFITT & EIDSON, P.A.**



Principal Place of Business  
**255 SOUTH ORANGE AVENUE  
17TH FLOOR  
ORLANDO, FL 32801**

Mailing Address  
**255 SOUTH ORANGE AVENUE  
17TH FLOOR  
ORLANDO, FL 32801**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**6. Name and Address of Current Registered Agent**  
  
**NADEAU, ROBERT B JR.  
C/O AKERMAN, SENTERFIT  
255 SOUTH ORANGE AVENUE, 17TH FLOOR  
ORLANDO, FL 32801**

**7. Name and Address of New Registered Agent**  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** 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 \_\_\_\_\_

**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 LARSEN, PETER O 500 LEMASTER DR JACKSONVILLE, FL 32082	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BROWN, NINA K 6342 SW 109TH STREET MIAMI, FL 33156	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MELLEN, III R 9003 CLASSIC CT ORLANDO, FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPC CARDWELL, J THOMAS 1516 W IVANHOE BLVD ORLANDO, FL 32804	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BATCHELDER, DRAKE M 9301 S ORCHARD RD WEST PALM BEACH, FL 33401	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KLINGHOFFER, TEDDY D 2575 MAYFAIR LANE FORT LAUDERDALE, FL 33327	<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

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"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**SEE ATTACHED FOR ADDITIONAL OFFICERS/DIRECTORS**

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:** *J. Thomas Cardwell*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **J THOMAS CARDWELL** Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

# ATTACHMENT

Akerman, Senterfitt & Eidson, P.A.  
Attachment to 2005 For Profit Corporation  
Annual Report  
BLOCK 10/11  
Additional Officers/Directors for 2005

14010059  
# V28263

	DELETE	CHANGE	ADDITION
Title	D		
Name:	Michael I. Goldberg		ADDITION
Street Address:	1170 Harbor Court		
City-ST-Zip:	Hollywood, FL 33019		
Title	V		
Name:	James M. Miller		ADDITION
Street Address:	550 San Servando Avenue		
City-ST-Zip:	Coral Gables, FL 33143		
Title	D		
Name:	Stephen K. Roddenberry		
Street Address:	14140 SW 69th Avenue		
City-ST-Zip:	Miami, FL 33158		
Title	D		
Name:	Andrew M. Smulian		
Street Address:	270 Marinero Court		
City-ST-Zip:	Coral Gables, FL 33143		
Title	V		
Name:	Timothy J. McDermott		
Street Address:	4564 Ortega Boulevard		
City-ST-Zip:	Jacksonville, FL 32210		
Title	V	VD	
Name:	Joseph W.N. Rugg		
Street Address:	709 S. Packwood Avenue		
City-ST-Zip:	Tampa, FL 33606		
Title	D	DELETE	
Name:	Charles Ketchey, Jr		
Street Address:	902 Frankland Road		
City-ST-Zip:	Tampa, FL 33629		
Title	V		
Name:	Allan J Katz		
Street Address:	1715 Tarpon Drive		
City-ST-Zip:	Tallahassee, FL 32308		
Title	V		
Name:	Gregory A Nelson		
Street Address:	1081 Gulfstream Way		
City-ST-Zip:	Riviera Beach, FL 33404		
Title	S/D		
Name:	Michael P McMahon		
Street Address:	1021 Wald Road		
City-ST-Zip:	Orlando, FL 32806		
Title	V	DELETE	
Name:	Robert Zinn		
Street Address:	6351 SW 134th Drive		
City-ST-Zip:	Miami, FL 33156		