

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V46981

Entity Name: BOB CAVANAUGH, INC.

FILED
Jan 10, 2005
Secretary of State

Current Principal Place of Business:

14 OCEAN PINES DR.
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 730484
ORMOND BCH, FL 321730484 US

New Mailing Address:

FEI Number: 59-3141644

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CAVANAUGH, ROBERT
14 OCEAN PINES DR.
ORMOND BCH, FL 32174 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: CAVANAUGH, ROBERT,
Address: 14 OCEAN PINES DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP () Delete
Name: CAVANAUGH, ROBERT B
Address: 14 OCEAN PINES DR
City-St-Zip: ORMOND BEACH, 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: ROBERT E. CAVANAUGH

PRES

01/10/2005

Electronic Signature of Signing Officer or Director

Date