2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 06, 2005 08:00 AM Secretary of State

DOCU 1. Entity Nan DARL, IN					Seci	etary o	n State
1040 HIGHW	VAY 17 NORTH	ailing Address 040 HIGHWAY 17 NORTH BARTOW, FL 33830 US	-				
Г	OO NOT WRITE II	CE	02042005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For				
			59-1533 5. Certificate of	3007 of Status Desired		Not Applicable Additional	
	5. Name and Address of Current Regis				Fee Req	juirea	
SMITH, JA 1816 3RD	ANE W COURT S <u>.</u> E.		DO	NOT WE	ITE		
WINTER HAVEN, FL 33880			IN THIS SPACE				
	named entity submits this statement for the plans of registered agent.	ourpose of changing its register	ed office or registere	ed agent, or both	, in the State of Florid	a. 1 am familiar v	vith, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	and a second	d Agent signature required			DATE	-
After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution	noing _ \$5.	00 May Be			
TITLE	OFFICERS AND DIRECT	CTORS					
NAME STREET ADDRESS CITY-ST-ZIP	SMITH, WADE C. 1816 3RD_COURT S.E. WINTER HAVEN, FL 338804416			-Marie amazzare arrametisation	U0000028 0 4/06/05- 80	39061 3010-012	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, JANE W. 1816 3RD COURT S.E. WINTER HAVEN, FL 338804416			· = · · · · · · · · · · · · · · · · · ·			
TITLE Name Street address City-St-Zip	ST HOUSTON, JAMES E 6201 BANYAN TERRACE PLANTATION, FL 33317		The state of the s	DO	NOT WF	RITE	
Title Name Street address City-St-Zip				IN T	HIS SPA	CE	
TITLE Name Street address City-St-Zip			at the transfer of the transfe				
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
of the corr	ertify that the Information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with all	l to execute this report as requir	nption stated in Secure shall have the seed by Chapter 607,	tion 119.07(3)(i) ame legal effect Florida Statutes	, Florida Statutes, I fur as if made under oath and that my name ap	ther certify that tr ; that I am an offi pears in Block 1	ne information cer or director 0 or Block 11 if