

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000073372

**Entity Name:** 505 PARTNERS, INC.

**Current Principal Place of Business:**

7115 SOUTH TROPICAL TRAIL  
MERRITT ISLAND, FL 32952

**Current Mailing Address:**

P.O. BOX 411101  
MELBOURNE, FL 32941

**FEI Number:** 20-0069232

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KILBORNE, G. BRIGGS  
7115 SOUTH TROPICAL TRAIL  
MERRITT ISLAND, FL 32952 US

*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

**Officer/Director Detail :**

Title D  
Name KILBORNE, G. BRIGGS  
Address P.O. BOX 411101  
City-State-Zip: MELBOURNE FL 32941

Title D  
Name SECREST, JEFFREY A  
Address 31 CAYMAN PL  
City-State-Zip: PALM BCH GARDENS FL 33418

Title D  
Name DEMARS, CHARLES D  
Address 9345 RIVER RD  
City-State-Zip: ALGONAC MI 48001

*I hereby 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 all other like empowered.*

**SIGNATURE:** G. BRIGGS KILBORNE

**PRESIDENT**

**03/22/2014**

Electronic Signature of Signing Officer/Director Detail

Date