

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M44302

FILED
Jun 30, 2005
Secretary of State

Entity Name: THE APPLE ORGANIZATION, INC.

Current Principal Place of Business:

C/O PHYLLIS APPLE
17840 W. DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 331604822

New Principal Place of Business:

Current Mailing Address:

C/O PHYLLIS APPLE
17840 W. DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 331604822

New Mailing Address:

FEI Number: 59-2766503 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

APPLE, PHYLLIS
17840 W. DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33160 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: PST () Delete
Name: APPLE, PHYLLIS,
Address: 20420 N.E. 34TH CT.
City-St-Zip: N. MIAMI BEACH, FL 33180

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/S (X) Change () Addition
Name: APPLE, PHYLLIS
Address: 20420 N.E. 34TH CT.
City-St-Zip: N. MIAMI BEACH, FL 33180 US

Title: P () Change (X) Addition
Name: LANGSTON, ANGELICA B
Address: 17840 W. DIXIE HIGHWAY
City-St-Zip: N. MIAMI BEACH, FL 33160 US

Title: D/T () Change (X) Addition
Name: GREENSTEIN, STANLEY G
Address: 17840 W. DIXIE HIGHWAY
City-St-Zip: N. MIAMI BEACH, FL 33160 US

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: PHYLLIS B. APPLE

D/S

06/30/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date