

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24866

FILED
May 01, 2005
Secretary of State

Entity Name: TUTTEROW STARS OF TOMORROW, INC.

Current Principal Place of Business:

452 5TH AVE SE
LARGO, FL 33771 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 650
LARGO, F 33779 US

New Mailing Address:

FEI Number: 59-2871199 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KENNEDY, DEBBIE
452 5TH AVE SE
LARGO, FL 33771 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COULTAS, KAREN
Address: 3690 AVOCADO DRIVE
City-St-Zip: LARGO, FL 33770

Title: VP () Delete
Name: FREITAS, ALICIA
Address: 200 OAKWOOD DRIVE
City-St-Zip: LARGO, FL 33770

Title: S () Delete
Name: TOLL, TERRI
Address: 13120 RIDGE ROAD
City-St-Zip: LARGO, FL 33778

Title: T () Delete
Name: GRIMES, KIM
Address: 2401 13TH AVE. S.W.
City-St-Zip: LARGO, FL 33770

Title: D () Delete
Name: KENNEDY, DEBBIE
Address: 452 5TH AVE SE
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: BORZEWSKI, MANDY
Address: 9023 ST ANDREWS DR
City-St-Zip: LARGO, FL 33777

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FREITAS, ALICIA
Address: 200 OAKWOOD DRIVE
City-St-Zip: LARGO, FL 33770

Title: VP (X) Change () Addition
Name: GRIMES, KIM
Address: 2401 13TH AVE SW
City-St-Zip: LARGO, FL 33770

Title: S (X) Change () Addition
Name: FOSTER, DONNA
Address: 738 NATALIE LANE
City-St-Zip: PALM HARBOR, FL 34683

Title: T (X) Change () Addition
Name: COULTAS, KAREN
Address: 3690 AVOCADO DRIVE
City-St-Zip: LARGO, FL 33770

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KIM GRIMES

VP

05/01/2005

Electronic Signature of Signing Officer or Director

_____ Date