

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jun 03, 2004 8:00 am**  
**Secretary of State**

06-03-2004 90004 023 \*\*\*150.00

**DOCUMENT # P0100052268**  
 1. Entity Name  
**DEBORAH DESELMS A ROMANTIC ISLAND WEDDING INC.**



Principal Place of Business      Mailing Address  
**1168 MCGREGOR DR**      **1168 MCGREGOR DR**  
**4D**      **4D**  
**FT MYERS, FL 33919**      **FT MYERS, FL 33919**

**54056578**



2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

02112004      Chg-P      CR2E034 (10/03)

4. FEI Number      Applied For  
**65-1108293**      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
DESELMS, DEBORAH 1168 MCGREGOR DR RD FT MYERS, FL 33919		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		<b>FL</b> Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After 1/1/04, Fee will be \$550.00**      9. Election Campaign Financing Trust Fund Contribution.      \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	DESELMS, DEBORAH	1168 LAKE MCGREGOR DR 4D	FORT MYERS, FL 33919				

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Deborah DeSelms*      Date: *4-30-04*      Daytime Phone #: *239 489-2439*