## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000107754

Entity Name: BALLOUGH BAY, INC.

Name:

Address:

City-St-Zip:

FILED Mar 14, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1501 RIDGEWOOD AVENUE SUITE 217 HOLLY HILL, FL 32117 **New Mailing Address: Current Mailing Address:** 1501 RIDGEWOOD AVENUE SUITE 217 HOLLY HILL, FL 32117 FEI Number: 20-1408564 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KOWITZ, ARTHUR 1501 RIDGEWOOD AVENUE SUITE 217 HOLLY HILL, FL 32117 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition LYONS, JANET Name: Name: 1808 N INDIAN RIVER ROAD Address: Address: City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: KOWITZ, WANDA Name: 1501 RIDGEWOOD AVENUE #217 Address: Address: HOLLYWOOD HILL, FL 32117 City-St-Zip: City-St-Zip: Title: () Delete Title: STD () Change () Addition LYONS, CHARLES Name: Name: 1808 N INDIAN RIVER ROAD Address: Address: City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip: Title: ( ) Delete Title: () Change () Addition KOWITZ, ARTHUR

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ARTHUR KOWITZ D 03/14/2005

1501 RIDGEWOOD AVENUE #217

HOLLY HILL, FL 32117