

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000020935

FILED
Apr 28, 2005
Secretary of State

Entity Name: RED BARN GRAPHICS, INC.

Current Principal Place of Business:

1825 WEST FRENCH AVENUE
ORANGE CITY, FL 32763 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 740789
ORANGE CITY, FL 327740789 US

New Mailing Address:

FEI Number: 59-3404327 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCRAY, MONICA M
1825 WEST FRENCH AVENUE
ORANGE CITY, FL 32774 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: V (X) Delete
Name: MCCRAY, CATHERINE
Address: 1825 WEST FRENCH AVENUE
City-St-Zip: ORANGE CITY, FL

Title: P () Delete
Name: MCCRAY, MONICA MARIE B
Address: 1825 WEST FRENCH AVENUE
City-St-Zip: ORANGE CITY, FL

Title: ST () Delete
Name: DIEHL, LAURINDA
Address: 1040 W. FRENCH AVE
City-St-Zip: ORANGE CITY, FL 32763

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PV (X) Change () Addition
Name: MCCRAY, MONICA M
Address: 1825 WEST FRENCH AVENUE
City-St-Zip: ORANGE CITY, FL 32763

Title: ST (X) Change () Addition
Name: DIEHL, LAURINDA
Address: 1040 W. FRENCH AVE
City-St-Zip: ORANGE CITY, FL 32763

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: MONICA M MCCRAY

PV

04/28/2005

Electronic Signature of Signing Officer or Director

_____ Date