## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 444858**

Entity Name: MAPLE LANE CATTLE CO., INC.

FILED Jan 27, 2005 Secretary of State

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Current Principal Place of Business:			New Principal Place	of Business:
	ERESA ARBO FERRACE, FL			
Current Mailing Address:			New Mailing Address:	
	ERESA ARBO TERRACE, FL			
FEI Number	: 59-1531766	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:	
	HARRY M A ANN AVE W 'L 33609 U:	3		
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
SIGNATUI	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	T ( APRILE, JENN 11004 TERES/ TEMPLE TERF	A ARBOR DR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	S ( APRILE, JOSE 1112 WEST RI TEMPLE TERF	VER DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VD ( APRILE, DANIE 6704 DRIFTING TEMPLE TERF	3 SANDS	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	T ( APRILE, RONA	) Delete LD,	Title: Name:	( ) Change ( ) Addition

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.

Address:

City-St-Zip:

SIGNATURE: JENNIE APRILE PRES 01/27/2005

9225 KINGSRIDGE DR.

TAMPA, FL

Address:

City-St-Zip: