

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 527901

FILED
Apr 12, 2005
Secretary of State

Entity Name: COTTAGE KEEPERS, INC.

Current Principal Place of Business:

425 BREVARD AVE
COCOA VILLAGE, FL 32922

New Principal Place of Business:

Current Mailing Address:

425 BREVARD AVE
COCOA VILLAGE, FL 32922

New Mailing Address:

FEI Number: 59-1808037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, JANET C.
425 BREVARD AVE
COCOA, FL 32922 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: P () Delete
Name: STEWART, JANET C.,
Address: 1096 FAIRLAWN DRIVE
City-St-Zip: ROCKLEDTE, FL

Title: V () Delete
Name: STEWART, JOHN, H,
Address: 1096 FAIRLAWN DRIVE
City-St-Zip: ROCKLEDGE, FL

Title: D () Delete
Name: MITCHELL, THERESA
Address: 1012 W BARTON BLVD
City-St-Zip: ROCKLEDGE, FL 32955

Title: D () Delete
Name: STEWART, MICHAEL
Address: 1039 JACARANDA CIR
City-St-Zip: ROCKLEDGE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

SIGNATURE: THERESA S. MITCHELL

D

04/12/2005

Electronic Signature of Signing Officer or Director

Date