

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J26735

FILED
Feb 17, 2005
Secretary of State

Entity Name: COLOR CONCEPTS PRINTING AND DESIGN COMPANY

Current Principal Place of Business:

2602 TAMPA EAST BLVD
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

2602 TAMPA EAST BLVD
TAMPA, FL 33619

New Mailing Address:

FEI Number: 59-2705127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROD, SHERMAN M
3314 HENDERSON BLVD
SUITE 100
TAMPA, FL 33609 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: PD () Delete
Name: WAHLER, ROBIN
Address: 2602 TAMPA EAST BLVD
City-St-Zip: TAMPA, FL 33619 US

Title: VD () Delete
Name: COLLYER, DAVID D
Address: 2602 TAMPA EAST BLVD
City-St-Zip: TAMPA, FL 33619 US

Title: ST () Delete
Name: STEGALL, JACQULYN
Address: 2602 TAMPA EAST BLVD
City-St-Zip: TAMPA, FL 33619 US

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:

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: ROBIN WAHLER

PD

02/17/2005

Electronic Signature of Signing Officer or Director

Date