## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J50143

Entity Name: MAX BALLOON, INC.

**FILED** Feb 21, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2170 S R 434 WEST 255 PRIMERA BOULEVARD

SUITE 210 SUITE 322

LONGWOOD, FL 32779 US LAKE MARY, FL 32746

**New Mailing Address: Current Mailing Address:** 

2170 S R 434 WEST 255 PRIMERA BOULEVARD SUITE 332

SUITE 210

LONGWOOD, FL 32779 US LAKE MARY, FL 32746 US

FEI Number: 59-2830313 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:

BEYER, DAVID A PIPER MARBURY RUDNICK & WOLFE LLP 101 E. KENNEDY BLVD., #2000 TAMPA, FL 33602 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: (X) Change ( ) Addition ( ) Delete Title: HACHENBERGER, GLENDA HACHENBERGER, GLENDA Name: Name:

2170 S R 434 WEST STE 210 255 PRIMERA BOULEVARD, SUITE 332 Address: Address:

City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: LAKE MARY, FL 32746 US

( ) Delete Title: **PSDT** Title: (X) Change ( ) Addition HACHENBERGER, DONALD J Name: Name: HACHENBERGER, DONALD J 2170 S R 434 WEST STE 210 Address: 255 PRIMERA BOULEVARD SUITE 332 Address:

LONGWOOD, FL 32779 LAKE MARY, FL 32746 City-St-Zip: 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: DONALD J HACHENBERGER **PSTD** 02/21/2005