

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J75985

FILED
Apr 29, 2005
Secretary of State

Entity Name: ANN'S NEW BEGINNING, INC.

Current Principal Place of Business:

% ANNIE L. MOSES
671 KINGSLEY AVE
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

% ANNIE L. MOSES
671 KINGSLEY AVE
ORANGE PARK, FL 32073

New Mailing Address:

FEI Number: 59-2744747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSES, ANNIE L.
671 KINGSLEY AVE
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

MOSES, ANNIE L.
671 KINGSLEY AVE
ORANGE PARK, FL 32073 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: ANNIE L MOSES

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOSES, ANNIE L.,
Address: 671 KINGSLEY AVE
City-St-Zip: ORANGE PARK, FL

Title: D () Delete
Name: MOSES, RUSSELL C.,
Address: 671 KINGSLEY AVE
City-St-Zip: ORANGE PARK, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/VP (X) Change () Addition
Name: MOSES, ANNIE L.,
Address: 671 KINGSLEY AVE
City-St-Zip: ORANGE PARK, FL

Title: D/P (X) Change () Addition
Name: MOSES, RUSSELL C.,
Address: 671 KINGSLEY AVE
City-St-Zip: ORANGE PARK, FL

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: ANNIE L MOSES

VP

04/29/2005

Electronic Signature of Signing Officer or Director

Date