

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K08283

FILED  
Jan 13, 2005  
Secretary of State

Entity Name: BURNS' HAPPY HOLLOW, INC.

## Current Principal Place of Business:

1361 QUINTARA CT  
MARCO ISLAND, FL 34145

## New Principal Place of Business:

## Current Mailing Address:

1361 QUINTARA CT  
MARCO ISLAND, FL 34145

## New Mailing Address:

FEI Number: 65-0039433

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GREUSEL, JAMIE B.  
1104 N COLLIER BLVD  
MARCO ISLAND, FL 33937 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: D ( ) Delete  
Name: BURNS, ROBERT H.,  
Address: N22 W29084 HAPPY HOLLOW  
City-St-Zip: PEWAUKEE, WI

Title: D ( ) Delete  
Name: BURNS, SHARON,  
Address: N22 W29084 HAPPY HOLLOW  
City-St-Zip: PEWAUKEE, WI

Title: D ( ) Delete  
Name: BURNS, WILLIAM D.,  
Address: N22 W29084 HAPPY HOLLOW  
City-St-Zip: PEWAUKEE, WI

Title: D ( ) Delete  
Name: KNUTSON, SUZANNE  
Address: N22 W29072 HAPPY HOLLOW RD  
City-St-Zip: PEWAUKEE, WI 53072

## 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: SHARON A. BURNS

PRES

01/13/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date