

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004435

FILED  
Feb 06, 2005  
Secretary of State

Entity Name: PRIMATE PARADISE, INC.

## Current Principal Place of Business:

2465 REED ELLIS ROAD  
OSTEEN, FL 32764

## New Principal Place of Business:

2465 REED ELLIS ROAD  
OSTEEN, FL 32764 US

## Current Mailing Address:

2465 REED ELLIS ROAD  
OSTEEN, FL 32764

## New Mailing Address:

2465 REED ELLIS ROAD  
OSTEEN, FL 32764 US

FEI Number: 57-1166663

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOOKER, KIM C ESQ  
170 BLOXHAM AVENUE  
ORANGE CITY, FL 32763 US

## Name and Address of New Registered Agent:

BOOKER, KIM C ESQ  
2582 S. VOLUSIA AVE  
ORANGE CITY, FL 32763 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:

02/06/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WASKO, MARY LINDA  
Address: 2465 REED ELLIS ROAD  
City-St-Zip: OSTEEN, FL 32764

Title: D ( ) Delete  
Name: WASKO, ANDREW J  
Address: 2465 REED ELLIS ROAD  
City-St-Zip: OSTEEN, FL 32764

Title: D ( ) Delete  
Name: LEW, JENNIFER  
Address: 8848 HARPERS GLEN CT  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D ( ) Delete  
Name: KOEHLER, SHIRLEY  
Address: 207 DUNHAM AVE  
City-St-Zip: INTERLACHEN, FL 32148

Title: D ( ) Delete  
Name: FULLER, VICKY  
Address: 16557 SE 170TH AVE  
City-St-Zip: WEIRSDALE, FL 32195D

## 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:

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

SIGNATURE: MARY L. WASKO

D

02/06/2005

Electronic Signature of Signing Officer or Director

Date