## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000005291

FILED May 22, 2005 Secretary of State

Entity Name: MONKEY ANTICS PRIMATES HELPING PRIMATES, INC.

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

5055 S DALE MABRY HWY 2839 TORRANCE DRIVE

APT 411 LAND O' LAKES, FL 34638 US

TAMPA, FL 33611 US

Current Mailing Address: New Mailing Address:

5055 S DALE MABRY HWY 2839 TORRANCE DRIVE

APT 411 LAND O' LAKES, FL 34638 US TAMPA, FL 33611 US

FEI Number: 59-3343940 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSNER, PAUL E

5055 S DALE MABRY HWY

APT 411

ROSNER, PAUL E

2839 TORRANCE DRIVE

LAND O'LAKES EL 34638 LII

APT 411 LAND O' LAKES, FL 34638 US TAMPA, FL 33611 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: 05/22/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition

 Name:
 ROSNER, PAUL E
 Name:
 ROSNER, PAUL E

 Address:
 5055 S DALE MABRY HWY - #411
 Address:
 2839 TORRANCE DRIVE

 City-St-Zip:
 TAMPA, FL 33611
 City-St-Zip:
 LAND O' LAKES, FL 34638

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

 Name:
 ROSNER, AARON
 Name:
 ROSNER, AARON

 Address:
 5055 S DALE MABRY HWY - #411
 Address:
 2839 TORRANCE DRIVE

 City-St-Zip:
 TAMPA, FL 33611
 City-St-Zip:
 LAND O' LAKES, FL 34638

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 WISELTIER, JÂY
 Name:
 WISELTIER, JÂY

 Address:
 5055 S DALE MABRY HWY - #411
 Address:
 2839 TORRANCE DRIVE

 City-St-Zip:
 TAMPA, FL 33611
 City-St-Zip:
 LAND O' LAKES, FL 34638

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HANNON, JOY
 Name:

 Address:
 161 S. ROOKS AVE.
 Address:

 City-St-Zip:
 INVERNESS, FL 33597
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ST. CLAIR, ROBERTA
 Name:

 Address:
 2827 S.W. 116TH AVE.
 Address:

 City-St-Zip:
 WEBSTER, FL 33597
 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: PAUL E. ROSNER PSTD 05/22/2005

Electronic Signature of Signing Officer or Director

Date