

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000580

FILED  
Jun 30, 2005  
Secretary of State

Entity Name: TALONS & TAILS, INC.

**Current Principal Place of Business:**

17930 N.W. 19TH ST.  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

17930 N.W. 19TH ST.  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

FEI Number: 65-0894695      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:**

FENIMORE, LYNN  
17930 N.W. 19TH ST.  
PEMBROKE PINES, FL 33029      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

**OFFICERS AND DIRECTORS:**

Title: CO      ( ) Delete  
Name: FENIMORE, LYNN  
Address: 17930 NW 19TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: T      (X) Delete  
Name: STEELE, RICHARD A  
Address: 10660 GRIFFIN RD  
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: T      ( ) Delete  
Name: JOHNS, MIKE  
Address: 3551 N STATE ROAD 7  
City-St-Zip: HOLLYWOOD, FL 33021

Title: T      ( ) Delete  
Name: SEVERSON, CARMEL  
Address: 773 NW 103 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: T      (X) Delete  
Name: TEMPLES, BILL  
Address: 7780 NW 31ST ST  
City-St-Zip: HOLLYWOOD, FL 33024

**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: LYNN A FENIMORE

CEO

06/30/2005

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

\_\_\_\_\_  
Date