

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000013703

Entity Name: ANNE M. CAIN, INC.

FILED
Jan 13, 2005
Secretary of State

Current Principal Place of Business:

96150 PARK PLACE
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

95078 HITHER HILLS WAY
FERNANDINA BEACH, FL 32034

Current Mailing Address:

96150 PARK PLACE
FERNANDINA BEACH, FL 32034

New Mailing Address:

95078 HITHER HILLS WAY
FERNANDINA BEACH, FL 32034

FEI Number: 59-3622665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAIN, ANNE M
96150 PARK PLACE
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

CAIN, ANNE M
95078 HITHER HILLS WAY
FERNANDINA BEACH, FL 32034 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: ANNE M. CAIN

01/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CAIN, ANNE M
Address: 96150 PARK PLACE
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CAIN, ANNE M
Address: 95078 HITHER HILLS WAY
City-St-Zip: FERNANDINA BEACH, FL 32034

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: ANNE M. CAIN

D

01/13/2005

Electronic Signature of Signing Officer or Director

Date