

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000100021

Entity Name: TRANDS, INC.

FILED
Apr 11, 2005
Secretary of State

Current Principal Place of Business:

703 N MAIN STREET
STE A
GAINESVILLE, FL 32601 US

Current Mailing Address:

703 N MAIN STREET
STE A
GAINESVILLE, FL 32601 US

FEI Number: 59-3677949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRASHEAR, BRUCE
926 NW 13TH ST.
GAINESVILLE, FL 32601 US

New Principal Place of Business:

500 EAST UNIVERSITY AVE
STE D
GAINESVILLE, FL 32601 US

New Mailing Address:

500 EAST UNIVERSITY AVE
STE D
GAINESVILLE, FL 32601 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DEFILIPPO, RONALD A
Address: 1642 W UNIVERSITY AVE
City-St-Zip: GAINESVILLE, FL 32603

Title: VD () Delete
Name: SILVERMAN, TERRY N
Address: 703 N. MAIN ST., SUITE A
City-St-Zip: GAINESVILLE, FL 32601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: TERRY N. SILVERMAN

VD

04/11/2005

Electronic Signature of Signing Officer or Director

Date