


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000107335	
1. Entity Name WORK AT HOME AND LOVE IT GROUP, INC.	

Principal Place of Business 4504 SUMMER COVE DRIVE EAST STE 224 SARASOTA, FL 34243-4973	Mailing Address 4504 SUMMER COVE DRIVE EAST STE 224 SARASOTA, FL 34243-4973
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DO NOT WRITE IN THIS SPACE



02192005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1057022	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DEMAI, DANIEL J 1819 MAIN STREET STE 1100 SARASOTA, FL 34236-5999	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		<p>U00000266584 03/17/05-80034-021 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP DEMAI, CINDY L 4504 SUMMER COVE DRIVE EAST STE 224 SARASOTA, FL 342434973	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVPT DEMAI, DANIEL J 4504 SUMMER COVE DRIVE EAST STE 224 SARASOTA, FL 342434973	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	Daniel J. DeMay	02/22/05	941-957-3800
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>