

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000011678

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: TEMPTING TUB, INC.

## Current Principal Place of Business:

157 SANCHEZ AVE  
ORMOND BEACH, FL 32174

## New Principal Place of Business:

712 LUCERNE CIRCLE  
ORMOND BEACH, FL 32174

## Current Mailing Address:

157 SANCHEZ AVE  
ORMOND BEACH, FL 32174

## New Mailing Address:

712 LUCERNE CIRCLE  
ORMOND BEACH, FL 32174

FEI Number: 03-0515972

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAMERON, A. CRAIG ESQ  
15 WEST CHURCH STREET STE 301  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

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: PT ( ) Delete  
Name: SHANNON, BETH  
Address: 157 SANCHEZ AVE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VS ( ) Delete  
Name: COBB, CLAUDIA  
Address: 1513 CENTER AVE  
City-St-Zip: HOLLY HILL, FL 32117

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: SHANNON, BETH  
Address: 712 LUCERNE CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32174

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: BETH SHANNON

PT

04/30/2004

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

\_\_\_\_\_  
Date