

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000070765

Entity Name: SUSAN'S ROAMIN' TUB, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

5590 MICHLAR DRIVE
LAKE WORTH, FL 33467

New Principal Place of Business:

1804 NE 6TH TERRACE
GAINESVILLE, FL 32609

Current Mailing Address:

5590 MICHLAR DRIVE
LAKE WORTH, FL 33467

New Mailing Address:

1804 NE 6TH TERRACE
GAINESVILLE, FL 32609

FEI Number: 65-1129379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, SUSAN M
5590 MICHLAR DRIVE
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

MOORE, SUSAN M
1804 NE 6TH TERRACE
GAINESVILLE, FL 32609 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: SUSAN M. MOORE

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MOORE, SUSAN M
Address: 5590 MICHLAR DRIVE
City-St-Zip: LAKE WORTH, FL 33467 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MOORE, SUSAN M
Address: 1804 NE 6TH TERRACE
City-St-Zip: GAINESVILLE, FL 32609 US

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: SUSAN M. MOORE

PRES

04/30/2005

Electronic Signature of Signing Officer or Director

Date