2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000074990

FILED Jan 24, 2005 Secretary of State

Entity Name: SANFORD RESTORATION AND DEVELOPMENT INC

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	KE FAITH DR D, FL 32751				
Current Mailing Address:		New Mailing Address:			
I1450 INT	& COMPANY ERCHANGE (2, FL 33025	CIRCLE N			
El Number	: 59-3739663	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address o	of New Registered Agent:	
235 W LAI	SON, PATRICIA KE FAITH DR D. FL. 32751				
235 W LAI MAITLANI The above	KE FAITH DR D, FL 32751 e named entity e of Florida. RE:	US submits this statement for the		d office or registered agent, or both,	
235 W LAI MAITLANI The above n the State BIGNATUI	KE FAITH DR D, FL 32751 named entity e of Florida. RE: Electroi	US submits this statement for the nic Signature of Registered Ag		d office or registered agent, or both, Date	
235 W LAI MAITLANE The above n the State BIGNATUE	KE FAITH DR D, FL 32751 e named entity e of Florida. RE: Electrol mpaign Financin	US submits this statement for the nic Signature of Registered Ag g Trust Fund Contribution ().	ent	Date	
235 W LAI MAITLANE The above n the State BIGNATUE	KE FAITH DR D, FL 32751 named entity e of Florida. RE: Electroi	US submits this statement for the nic Signature of Registered Ag g Trust Fund Contribution ().	ent		
235 W LAI MAITLANE The above n the State BIGNATUE	KE FAITH DR D, FL 32751 E named entity e of Florida. RE: Electrol mpaign Financin S AND DIREC	US submits this statement for the nic Signature of Registered Ag g Trust Fund Contribution (). ETORS:) Delete PATRICIA D AITH DR	ent	Date	

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: BARBARA FARRELL D 01/24/2005