

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000118664

FILED
Apr 03, 2005
Secretary of State

Entity Name: HAMMONDSPORT GIFTS & ACCESSORIES, INC.

Current Principal Place of Business:

101 N RIVERSIDE DR #119W
POMPANO BEACH, FL 33062

New Principal Place of Business:

101 N. RIVERSIDE DRIVE
#205
POMPANO BEACH, FL 33062

Current Mailing Address:

2900 NE 14TH ST. #608
POMPANO BEACH, FL 33062

New Mailing Address:

2900 NE 14TH ST.
#608
POMPANO BEACH, FL 33062

FEI Number: 22-3850880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHIFFMAN, ADAM R
2999 NE 191 STREET STE 900
AVENTURA, FL 33180 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: PTD () Delete
Name: SMITH, LINDA F
Address: 101 N RIVERSIDE DR #119W
City-St-Zip: POMPANO BEACH, FL 33062

Title: VSD () Delete
Name: BLACKBURN, WALTER
Address: 101 N RIVERSIDE DR #119W
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: SMITH, LINDA F
Address: 2900 NE 14TH STREET #608
City-St-Zip: POMPANO BEACH, FL 33062

Title: VSD (X) Change () Addition
Name: BLACKBURN, WALTER
Address: 2900 NE 14TH STREET #608
City-St-Zip: POMPANO BEACH, FL 33062

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: LINDA F SMITH

PTD

04/03/2005

Electronic Signature of Signing Officer or Director

Date