## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**SIGNATURE** 

## **Secretary of State DOCUMENT # P01000118871** 1. Entity Name 01-19-2005 90004 049 \*\*\*158.75 MORGAN TANNING, INC. Principal Place of Business Mailing Address 15551 NW STREET U.S. HIGHWAY 441 3939 NW 37TH PLACE GAINESVILLE, FL 32606 **UNIT 120** ALACHUA, FL 32615 2. Principal Place of Business 3. Mailing Address <u>15218 NW</u> Suite, Apt. #, etc. Suite, Apt. #, etc. 01122005 CR2E034 (10/03) Chg-P Applied For City & State 4. FEI Number City & State Hach 01-0552442 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent LUTTRELL. SUSAN B **3939 NW 37TH PLACE** GAINESVILLE, FL 32606 Clarkua 33615 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. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 $\Box$ Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11 Susan B. Luttrell-Wiltus Change TITLE ☐ Delete TITLE LUTTRELL, SUSAN B isais ww asou pi NAME **3939 NW 37TH PLACE** STREET ADORESS STREET ADDRESS alachua F1 32615 CITY-ST-ZIP GAINESVILLE, FL 32606 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME MAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CTY-ST-ZP\_ CTTY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE STREET ADDRESS STREET ADDRESS CATY-ST-ZIP CITY-ST-7/P 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 attactment with an address, with all other like empowered.

FILED

Jan 19, 2005 8:00 am

ATTACHMENT POI 000/1887/

January 12, 2005

**Divisions of Corporations** P.O. Box 6198 Tallahassee, Fl. 32314-6198

To Whom It May Concern:

I would like to request to have my address changed. New mailing address 15218 NW 258th Place

Boluttiell Waters

Alachua, Fl. 32615

The physical address of the business is the same.

Thank you,

Susan B. Luttrell