

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000024190

FILED  
Jan 31, 2005  
Secretary of State

Entity Name: AMBER COMPANY, INCORPORATED

## Current Principal Place of Business:

1359 CLEVELAND ST.  
CLEARWATER, FL 33755

## New Principal Place of Business:

## Current Mailing Address:

1359 CLEVELAND ST  
CLEARWATER, FL 33755

## New Mailing Address:

FEI Number: 01-0624257      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HART, TERI L  
1359 CLEVELAND ST.  
CLEARWATER, FL 33755      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: DP ( ) Delete  
Name: HART, TERI L  
Address: 1008 1/2 DREW ST  
City-St-Zip: CLEARWATER, FL 33755

Title: S ( ) Delete  
Name: MAAL, EDITH  
Address: 904 SEVARD AVE  
City-St-Zip: CLEARWATER, FL 33764

Title: D ( ) Delete  
Name: ALLEN, FRED  
Address: 806 N. OSCEOLA AV  
City-St-Zip: CLEARWATER, FL 33755

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: HART, TERI L  
Address: 806 N OSCEOLA AVE  
City-St-Zip: CLEARWATER, FL 33755

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TERI HART

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

DP

01/31/2005

\_\_\_\_\_  
Date