

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 8:00 am
Secretary of State

03-21-2005 90113 048 ***150.00

DOCUMENT # P02000032515

1. Entity Name
PRETTY PENNY INC



Principal Place of Business
**7850 FRUITVILLE RD
SARASOTA, FL 34240**

Mailing Address
**7850 FRUITVILLE RD
SARASOTA, FL 34240**

50029115

2. Principal Place of Business

10370 Pittman Rd
Suite, Apt. #, etc.

3. Mailing Address

10370 Pittman Rd
Suite, Apt. #, etc.



01232005 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
65-0911422

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**KNEPP, DARRELL
7850 FRUITVILLE RD
SARASOTA, FL 34240**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

10370 Pittman Rd

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete
NAME **KNEPP, DARRELL**
STREET ADDRESS **7850 FRUITVILLE RD**
CITY- ST- ZIP **SARASOTA, FL 34240**

TITLE **BK** ☐ Delete
NAME **KNEPP, EVA**
STREET ADDRESS **7850 FRUITVILLE RD**
CITY- ST- ZIP **SARASOTA, FL 34240**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **10370 Pittman Rd**
STREET ADDRESS
CITY- ST- ZIP

TITLE ☒ Change ☐ Addition
NAME **10370 Pittman Rd**
STREET ADDRESS
CITY- ST- ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. 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 attachment with an address, with all other like empowered.

SIGNATURE

Darrell Knepp
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-18-05

Date

941-377-9439

Daytime Phone #