## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000118344

Entity Name: THE PAPER PLAYHOUSE, INC.

FILED Sep 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5114 COMMERCIAL WAY STE F 5144 COMMERCIAL WAY SPRING HILL, FL 34606 SPRING HILL, FL 34606

Current Mailing Address: New Mailing Address:

5114 COMMERCIAL WAY STE F 5144 COMMERCIAL WAY SPRING HILL, FL 34606 SPRING HILL, FL 34606

FEI Number: 11-3662686 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOODRING, LYNDA
5114 COMMERCIAL WAY STE F
5144 COMMERCIAL WAY
SPRING HILL, FL 34606
SPRING HILL, FL 34606

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: LYNDA S. WOODRING 09/30/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS () Delete Title: (X) Change ( ) Addition SMILEY, SHERRY SMILEY, SHERRY Name: Name: 11377 GENTER DR 11377 GENTER DR Address: Address: City-St-Zip: SPRING HILL, FL 34606 City-St-Zip: SPRING HILL, FL 34609

Title: DVT ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WOODRING, LYNDA
 Name:

 Address:
 7112 RIVER RUN BLVD
 Address:

 City-St-Zip:
 WEEKI WACHEE, FL 34607
 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: LYNDA S. WOODRING DVT 09/30/2004