

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000125687

Entity Name: RAINMAKER PRODUCTIONS, INC.

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

401 HARBOUR PLACE DR
#1123
TAMPA, FL 33602

Current Mailing Address:

PO BOX 638
TAMPA, FL 33601

New Principal Place of Business:

700 DOCKVIEW WAY
#1427
TAMPA, FL 33602

New Mailing Address:

FEI Number: 14-1854680

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRICKLAND, ROBERT
PO BOX 638
TAMPA, FL 33601 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: P () Delete
Name: STRICKLAND, ROBERT S
Address: PO BOX 638
City-St-Zip: TAMPA, FL 33601

Title: VO () Delete
Name: STRICKLAND, ROBERT S
Address: PO BOX 638
City-St-Zip: TAMPA, FL 33601

Title: T () Delete
Name: STRICKLAND, ANDREA
Address: PO BOX 638
City-St-Zip: TAMPA, FL 33601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ANDREA STRICKLAND

T

04/21/2005

Electronic Signature of Signing Officer or Director

Date