

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130346

FILED  
Mar 01, 2005  
Secretary of State

Entity Name: OVERHANG INVESTMENT, INC.

## Current Principal Place of Business:

8023 COUNTRY CLUB RD. N  
ST. PETERSBURG, FL 33710

## New Principal Place of Business:

7215 DARTMOUTH AVE N  
ST. PETERSBURG, FL 33710

## Current Mailing Address:

PO BOX 60486  
ST. PETERSBURG, FL 33784

## New Mailing Address:

PO BOX 7185  
ST. PETERSBURG, FL 33734

FEI Number: 16-1646395

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHRYER, SUSAN  
8023 COUNTRY CLUB RD. N  
ST. PETERSBURG, FL 33710 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: SCHRYER, SUSAN  
Address: 8023 COUNTRY CLUB RD. N  
City-St-Zip: ST. PETERSBURG, FL 33710

Title: DV ( ) Delete  
Name: GODIN, MICHEL  
Address: 2716 46TH AVENUE N.  
City-St-Zip: ST. PETERSBURG, FL 33714

Title: DS ( ) Delete  
Name: GIEBELHAUS, BARBARA  
Address: PO BOX 7185  
City-St-Zip: ST. PETERSBURG, FL 33734

Title: T ( ) Delete  
Name: CHATELIER, THIERRY  
Address: 8023 COUNTRY CLUB RD. N.  
City-St-Zip: ST. PETERSBURG, FL 33710

## 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:

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: SUSAN SCHRYER

DP

03/01/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date