## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Aug 01, 2005 8:00 am Secretary of State

1. Entity Nam	MENT # P02000132 EEE DIVISIONS INC.			06-27-200	05 90001 027 **:	*150.00		
Principal Place of Business Mailing Address 1390 PLUM AVENUE POST OFFICE 80X 540721 MERRITT ISLAND, FL 32952 MERRITT ISLAND, FL 32954				66025303				
2. Principal F Z Z G Suite, Apt.		54072]	06222005	Chg-P	CR2E034 (10/03)			
194y & Stat	HTsland Fl	Levit Ida	od El	4. FEI Numb		·	oplied For at Applicable	
3295	3 Record		Country	1	e of Status Desired	\$8.75 Add	ditional	
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent				
	N, WILLIAM D JR.							
	M AVENUE ISLAND, FL 32952	Street Address	Street Address (P.O. Box Number Is Not Acceptable)					
:			City	<u></u>		E∎ Zip Cod		
8. The above	named entity submits this statement for		City FL Zip Code ad office or registered agent, or both, in the State of Florida. Lam familiar with, and accept					
the obligations of registered agent.								
SIGNATURE Signature, typed or orlined name of registered agent and tide if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be Added to Fees to accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.							F.S., the notice.	
10.	OFFICERS AND D	DIRECTORS	11.	ADDITIONS	/CHANGES TO OFF	CERS AND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANGSTON, WILLIAM D JR. 1390 PLUM AVENUE MERRITT ISLAND, FL 32952	☐ Delete .	TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP			☐ Change	Addition	
TITLE		☐ Delete	TITLE NAME	····		☐ Change	Addition	
STREET ADDRESS CITY+ST-ZIP			STREET ADDRESS City-S1-ZIP					
THE		☐ Delete	TITLE			☐ Change	Add:tion	
STREET ADDRESS CITY+ST-ZIP			STREET ADDRESS CITY-SI-ZIP					
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NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-SI-ZIP			·		
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TITLE		☐ Delete	TITLE			☐ Change	☐ Addition	
STREET ADDRESS		/	NAME STREET ADDRESS					
CITY-S1-ZIP	and he that the information are also desired	his tillne stees and a state to	CITY-ST-ZIP		di Carina Control	Make a series of the		
12. I hereby certify that the information supplied with his filling goes 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 that my signature shall have the same legal effect as if made under oath; that I am an office or director of the corporation or the receiver of trustee employered to execute this report as required by Chapter 607, Florida Statutas; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.								

ATTACHMENT + PO20 01325 X8

Inc. P.O. Box 504271
Merritt Island, FL 32954 (26025305)

## Cherokee Divisions Inc.

July 27, 2005

**Division of Corporations** P.O Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam:

I am writing in response to your letter dated June 28, 2005 (I just received this notice on July 23, 2005) stating that I owe a late fee of \$400.00. I did not receive a Notice for Renewal and would therefore like you to please consider waiving the late fee. When I received the notice that the fee was due for the annual report/uniform business report form on June 15, 2005, I sent a \$150.00 check. Please let me know of your decision so that I can promptly proceed because the letter states I only have 30 days to respond.

Sincerely,

Owner