

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000012086

FILED
Jul 12, 2005
Secretary of State

Entity Name: TROPICAL STENCILS CO. OF CT, INC.

Current Principal Place of Business:

1556 FARRIER TRAIL
CLEARWATER, FL 33765

New Principal Place of Business:

1530 CYPRESS DRIVE
SUITE E
JUPITER, FL 33469

Current Mailing Address:

1556 FARRIER TRAIL
CLEARWATER, FL 33765

New Mailing Address:

1530 CYPRESS DRIVE
SUITE E
JUPITER, FL 33469

FEI Number: 59-3766996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICKETT, DOYLE
1556 FARRIER TRAIL
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

MCGLYNN, ROBERT
1530 CYPRESS DRIVE
SUITE E
JUPITER, FL 33469 US

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: ROBERT MCGLYNN

07/12/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RICKETT, DOYLE
Address: 1556 FARRIER TRAIL
City-St-Zip: CLEARWATER, FL 33765

Title: D () Delete
Name: RICKETT, JEANNE
Address: 1556 FARRIER TRAIL
City-St-Zip: CLEARWATER, FL 33765

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D () Change (X) Addition
Name: MCGLYNN, ROBERT J
Address: 1530 CYPRESS DRIVE. SUITE E
City-St-Zip: JUPITER, FL 33469

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: ROBERT MCGLYNN

PRES

07/12/2005

Electronic Signature of Signing Officer or Director

Date