

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2005 8:00 am
Secretary of State

05-06-2005 90083 029 ***150.00

DOCUMENT # P03000014796 1. Entity Name COMPUTER TROUBLESHOOTERS OF DUNEDIN, INC.			
Principal Place of Business 2007 GOLFVIEW DR DUNEDIN, FL 34698		Mailing Address 2007 GOLFVIEW DR DUNEDIN, FL 34698	
2. Principal Place of Business Suite, Apt. #, etc. 1576 main st		3. Mailing Address Suite, Apt. #, etc. 1576 main st.	
City & State Dunedin, FL		City & State Dunedin, FL	
Zip 34698		Zip 34698	
Country		Country	
4. FEI Number 55-0819512		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOLDRIDGE, KIM 2007 GOLFVIEW DR DUNEDIN, FL 34698		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1576 main st. City Dunedin FL Zip Code 34698	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		DATE 5-1-05	
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLDRIDGE, CHRISTOPHER 2007 GOLFVIEW DR DUNEDIN, FL 34698	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLDRIDGE, KIM 2007 GOLFVIEW DR DUNEDIN, FL 34698	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1576 main st. Dunedin, FL 34698	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1500 1576 main st. Dunedin FL 34698	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does 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 accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		DATE 5-1-05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	

Attachment

40083222

P03000014796

FLORIDA DEPARTMENT OF STATE

To Whom It May Concern:

Please waive the \$400 penalty for the annual report. The address shown on the internet printed form is incorrect. We have changed locations 2 times and haven't received our forms. Our correct address is:

1576 Main St
Dunedin, FL

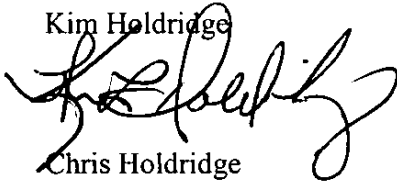
We have also terminated our accountant due to not filling other tax information on a timely manner.

We promise to not file late in the future.

Thank you,

Computer Troubleshooter of Dunedin, Inc

Kim Holdridge



Chris Holdridge

