2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000028992

Entity Name: MYRENA HUTTEN, INC.

Address:

City-St-Zip:

102 DUCK BILL COVE

PONTE VEDRA BEACH, FL 32082

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 102 DUCK BILL COVE PONTE VEDRA BEACH, FL 32082 **Current Mailing Address: New Mailing Address:** 102 DUCK BILL COVE PONTE VEDRA BEACH, FL 32082 FEI Number: 05-0562270 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUTTEN, MYRENA HUTTEN, MYRENA E 102 DUCK BILL COVE 102 DUCK BILL COVE PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082 US 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: MYRENA E HUTTEN 04/26/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HUTTEN, MYRENA E Name: Name: 102 DUCK BILL COVE Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: Title: Title: () Delete () Change () Addition Name: HUTTEN, MYRENA E Name: 102 DUCK BILL COVE Address: Address: PONTE VEDRA BEACH, FL 32082 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition HUTTEN, MYRENA Name: Name: 102 DUCK BILL COVE Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition HUTTEN, T. SCOTT Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: MYRENA E HUTTEN **PRES** 04/26/2005