## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000106675

Entity Name: SAIL FORTH PRODUCTIONS, INC

FILED May 31, 2005 Secretary of State

Littly Nai	IIIe. SAIL FOR	RITTERODOCTIONS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	PINE STREET ITE SPRINGS,	FL 32701			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	PINE STREET ITE SPRINGS,	FL 32701			
FEI Number	: 90-0126034	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	l Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:	
120 E. CO	DONNA L ESC NCORD STRE D, FL 32801		DAVIS, PHILIP C MR. 704 E. ALPINE ST. ALTAMONTE, FL 327	01 US	
	e named entity : e of Florida.	submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: PHILIP C. DAVIS				05/31/2005	
	Electror	ic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) IBAUGH, ALLEI 13063 ROYAL ORLANDO, FL	FERN DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D (†) IBAUGH, JAME 8735 CORKWO INDIANAPOLIS	OOD DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DAVIS, PHILIP 704 E. ALPINE		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) LISKEY, STEPI 11460 BROWN ORLANDO, FL	QUAIL CT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	AMADORI, JAS	Delete ON A ONT GLEN LANE	Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: PHILIP C. DAVIS PRES 05/31/2005

WINDERMERE, FL 34786

City-St-Zip: