## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000120810

Entity Name: INTOUCH PROPERTIES SOUTH, INC.

FILED Jan 20, 2005 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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16450 GULF BLVD., N. 16450 GULF BLVD., N.

REDDINGTON BEACH, FL 33708 NORTH REDINGTÓN BEACH, FL 33708

Current Mailing Address: New Mailing Address:

16450 GULF BLVD., N. 16450 GULF BLVD., N.

REDDINGTON BEACH, FL 33708 NORTH REDINGTÓN BEACH, FL 33708

FEI Number: 20-0350416 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:

MENNA, FRANK
16450 GULF BLVD.,
16450 GULF BLVD.,
ART 361

APT 261 APT 261

NORTH REDDINGTON BEACH, FL 33708 US NORTH REDINGTON BEACH, FL 33708 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: 01/20/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: PRES (X) Change ( ) Addition

Name: MENNA, FRANK Name: MENNA, FRANK

Address: 16450 GULF BLVD., APT 261 Address: 16450 GULF BLVD., APT 261

City-St-Zip: NORTH REDDINGTON BEACH, FL 33708 City-St-Zip: NORTH REDDINGTON BEACH, FL 33708

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MENNA, DALE
 Name:

 Address:
 16450 GULF BLVD., APT 261
 Address:

 City-St-Zip:
 NORTH REDDINGTON BEACH, FL 33708
 City-St-Zip:

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: DALE MENNA D 01/20/2005