

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000144519

FILED
Apr 30, 2005
Secretary of State

Entity Name: NECTAR'S CAFE, INC.

Current Principal Place of Business:

1040 SEMINOLE DRIVE
SUITE 1552
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

8701 MAITLAND SUMMIT BLVD
MAITLAND, FL 32810

Current Mailing Address:

1040 SEMINOLE DRIVE
SUITE 1552
FORT LAUDERDALE, FL 33304

New Mailing Address:

168 VILLA DI ESTE TERRACE
APT #112
LAKE MARY, FL 32746

FEI Number: 41-2117842

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILLILAND, LINDA L
1040 SEMINOLE DRIVE
SUITE 1552
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

GILLILAND, LINDA L
168 VILLA DI ESTE TERR
APT #112
LAKE MARY, FL 32746 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: LINDA L GILLILAND

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: GILLILAND, LINDA L
Address: 1040 SEMINOLE DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: GILLILAND, JOHN W
Address: 430 EAST PACKWOOD, #C-201
City-St-Zip: MAITLAND, FL 32751

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: GILLILAND, LINDA L
Address: 168 VILLA DI ESTE TERRACE APT #112
City-St-Zip: LAKE MARY, FL 32746

Title: D (X) Change () Addition
Name: GILLILAND, JOHN W
Address: 168 VILLA DI ESTE TERRACE #112
City-St-Zip: LAKE MARY, FL 32746

Title: D () Change (X) Addition
Name: GILLILAND, DEVIN P
Address: 168 VILLA DI ESTE TERRACE #112
City-St-Zip: LAKE MARY, FL 32746

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: LINDA L GILLILAND

PSD

04/30/2005

Electronic Signature of Signing Officer or Director

Date