2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2005
Secretary of State

DOCUMENT# P04000000894

Entity Name: AMPERSAND MERCHANDISING INC.

Current Principal Place of Business:

6753 THOMASVILLE RD., STE 108-151
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

6753 THOMASVILLE RD., STE 108-151
3440 BRIAR BRANCH TR.
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 20-0636355 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCINTYRE, RONALD
3440 BRIAR BRANCH TR
TALLAHASSEE, FL US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MCINTYRE, RONALD
Address: 3440 BRIAR BRANCH TR
City-St-Zip: TALLAHASSEE, FL

Title: D ( ) Delete
Name: STRZOK, SUSAN
Address: 12005 CEDAR BLUFF TR.
City-St-Zip: TALLAHASSEE, FL

Title: D (X) Delete
Name: CRANE, MELANIE
Address: 34 ROYAL OAKS CT.
City-St-Zip: CRAWFORDVILLE, FL

Title: D ( ) Delete
Name: WISER, DONNA
Address: 9730 SHADY PINE DR.
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: RONALD MCINTYRE D 04/23/2005

Electronic Signature of Signing Officer or Director Date