


FILED
Mar 04, 2005 8:00 am
Secretary of State

03-04-2005 90066 002 ***150.00

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

40025549



DOCUMENT # P04000003447			
1. Entity Name PORT HOLE OF VOLUSIA, INC.			
Principal Place of Business 932 HERBERT ST PORT ORANGE, FL 32129		Mailing Address 932 HERBERT ST PORT ORANGE, FL 32129	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 74-3113313		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
LOWE, JULIE R 732 TARRY TOWN TRAIL PORT ORANGE, FL 32127		Name Street Address (P.O. Box Number is Not Acceptable) 138 CORAL STREET City SOUTH DAYTONA FL Zip Code 32119	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST LOWE, JULIE R 732 TARRY TOWN TRAIL PORT ORANGE, FL 32127 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 138 CORAL STREET SOUTH DAYTONA, FL 32119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOWREY, ROBERT 12511 UPPER MANATEE RIVER RD. BRADENTON, FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: _____		Date _____	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JULIE LOWE		Daytime Phone # 384 761 6075	

R2R CONSULTING CORPORATION

ATTACHMENT

• 3959 South Nova Road, Suite 16
Port Orange, Florida 32127

Richard M. Yunker
President

40025549

P04000003447

Telephone
(386) 788-0909

TO: Port Hole

INSTRUCTIONS FOR FILING YEAR END CORPORATE TAX RETURNS:

FORM 1120 OR 1120-S Your year ended December 31, 2004 return reflects a balance due of \$ _____. Please deposit this amount, if any, at your bank using Federal Tax Deposit Coupon Form 8109; your check should be made payable to your bank. Please note in the memo section of your check: Form _____, FYE _____, and EIN _____.

Please sign, indicate title and date the bottom of page 1 and mail in the attached envelope on or before _____, 2005 to:

INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201

FORM F-1120 Your state tax return for the same period reflects a balance due of \$ _____. Please make your check payable for this amount, if any, to the Florida Department of Revenue. Please note in the memo section of your check: Form _____, FYE _____, and EIN _____. Include your check with your return.

Please sign, indicate title and date the bottom of page 1 and mail in the attached envelope on or before _____, 2005 to:

FLORIDA DEPARTMENT OF REVENUE
5050 W. TENNESSEE STREET
TALLAHASSEE, FL 32399-0135

FORM DR-601 Your 2005 Florida Intangible Tax Return, Form DR-601, was filed on the Internet. There was no money due with this tax return. A copy of the return filed is included in your duplicate set of returns.

VOLUSIA COUNTY TANGIBLE PROPERTY TAX RETURN Your 2005 Tangible Property Tax should be signed, dated and mailed in the attached envelope by April 1, 2005. There is no money currently due with this return; the County will bill you in November of this year.

UNIFORM BUSINESS REPORT Your 2005 Uniform Business Report IS IS NOT _____ enclosed. Please make your check for \$150.00 payable to Department of State. Please notate in the memo section of your check, Corporate Annual Report, 2005, and your FEI #. If your corporate annual report is not enclosed, please verify that you have filed for 2005.

Please sign and date the bottom of page 1 and mail in the attached envelope on or before May 1, 2005 to:

DIVISION OF CORPORATIONS
P.O. BOX 6198
TALLAHASSEE, FL 32314

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT ME.
Richard M. Yunker