

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000011057

**FILED**  
**Apr 29, 2005**  
**Secretary of State**

**Entity Name:** MOONLIGHT COMPLETE MAINTENANCE, INC.

**Current Principal Place of Business:**

12622 STANWYCK CIR  
TAMPA, FL 33626

**New Principal Place of Business:**

1802 LANAI ISLE DR.  
CORY LAKE, FL 33647

**Current Mailing Address:**

P O BOX 260502  
TAMPA, FL 33685

**New Mailing Address:**

12622 STANWYCK CIR  
TAMPA, FL 33626

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TORTORELLO, JOHN V  
4822 BONITA VISTA DR  
TAMPA, FL 33634 US

**Name and Address of New Registered Agent:**

LEE, JACKI K  
12622 STANWYCK CIR.  
TAMPA, FL 33626 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: JACKI K LEE

04/29/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: LEE, JACKI K  
Address: 12622 STANWYCK CIR  
City-St-Zip: TAMPA, FL 33626

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: JACKI K LEE

PST

04/29/2005

Electronic Signature of Signing Officer or Director

Date