

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000055077

Entity Name: SWEET DARLIN 2 INC

FILED  
Jul 22, 2005  
Secretary of State

## Current Principal Place of Business:

13820 ST. AUGUSTINE RD., STE. 113  
JACKSONVILLE, FL 32258 US

## New Principal Place of Business:

## Current Mailing Address:

13820 ST. AUGUSTINE RD., STE. 113  
JACKSONVILLE, FL 32258 US

## New Mailing Address:

FEI Number: 20-0939829

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAY, TRESSA  
13820 ST. AUGUSTINE RD.  
STE. 113  
JACKSONVILLE, FL 32258 US

## Name and Address of New Registered Agent:

RAY, T A  
13820 ST. AUGUSTINE RD.  
STE. 113  
JACKSONVILLE, FL 32258 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: T A RAY

07/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CARTER, DARLEEN L  
Address: 10773 SADDLEBRED DR  
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: VP ( ) Delete  
Name: RAY, GORDON  
Address: 5143 THOROUGHbred BLVD.  
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP ( ) Delete  
Name: RAY, TRESSA  
Address: 5143 THOROUGHbred BLVD.  
City-St-Zip: JACKSONVILLE, FL 32257

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: RAY, G J  
Address: 13820 ST AUGUSTINE RD #113  
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP (X) Change ( ) Addition  
Name: RAY, TRESSA  
Address: 13820 ST AUGUSTINE RD #113  
City-St-Zip: JACKSONVILLE, FL 32258

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: T A RAY

VP

07/22/2005

Electronic Signature of Signing Officer or Director

Date