

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000056341

Entity Name: MAIL & MORE, INC.

FILED
Mar 03, 2005
Secretary of State

Current Principal Place of Business:

2029 GREENVIEW COVE DRIVE
WELLINGTON, FL 33414

New Principal Place of Business:

13860 WELLINGTON TRACE
SUITE 38
WELLINGTON, FL 33414

Current Mailing Address:

2029 GREENVIEW COVE DRIVE
WELLINGTON, FL 33414

New Mailing Address:

13860 WELLINGTON TRACE
SUITE 38
WELLINGTON, FL 33414

FEI Number: 20-0990715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUBOIS, MONTE D
2029 GREENVIEW COVE DRIVE
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

DUBOIS, MONTE D
1947 STAIMFORD CIRCLE
WELLINGTON, FL 33414 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:

03/03/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: DUBOIS, MONTE D
Address: 2029 GREENVIEW COVE DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: VTD () Delete
Name: DUBOIS, KELLY M
Address: 2029 GREENVIEW COVE DRIVE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: DUBOIS, MONTE D
Address: 1947 STAIMFORD CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: VTD (X) Change () Addition
Name: DUBOIS, KELLY M
Address: 1947 STAIMFORD CIRCLE
City-St-Zip: WELLINGTON, FL 33414

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: MONTE DUBOIS

PSD

03/03/2005

Electronic Signature of Signing Officer or Director

Date