

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059823

FILED
Apr 29, 2005
Secretary of State

Entity Name: WILLIAM GARROW PRODUCTIONS, INC.

Current Principal Place of Business:

8639 N HIMES AVE, # 2423
TAMPA, FL 33614

New Principal Place of Business:

8639 N HIMES AVE
2423
TAMPA, FL 33614

Current Mailing Address:

8639 N HIMES AVE, # 2423
TAMPA, FL 33614

New Mailing Address:

PO BOX 27294
TAMPA, FL 33623

FEI Number: 02-0721501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARROW, WILLIAM
8639 N HIMES AVE, # 2423
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

GARROW II, WILLIAM R
8639 N HIMES AVE, # 2423
TAMPA, FL 33614 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: WILLIAM R GARROW II

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: GARROW II, WILLIAM R
Address: 8639 N HIMES AVE, #2423
City-St-Zip: TAMPA, FL 33614

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: WILLIAM R GARROW II

PRES

04/29/2005

Electronic Signature of Signing Officer or Director

Date