

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000071671

Entity Name: BABY BUTLER, INC.

FILED  
Mar 08, 2007  
Secretary of State

## Current Principal Place of Business:

2340 PERIWINKLE WAY  
UNIT M-1  
SANIBEL, FL 33957

## New Principal Place of Business:

1625 SE 46TH STREET  
STE. 5A  
CAPE CORAL, FL 33904

## Current Mailing Address:

2340 PERIWINKLE WAY  
UNIT M-1  
SANIBEL, FL 33957

## New Mailing Address:

1625 SE 46TH STREET  
STE. 5A  
CAPE CORAL, FL 33904

FEI Number: 03-0541101

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GIORDANI, ROSEANNE  
2340 PERIWINKLE WAY  
UNIT M-1  
SANIBEL, FL 33957 US

## Name and Address of New Registered Agent:

LIVINGSTON, EDWARD M ESQ.  
963 TRAIL TERRACE DRIVE  
NAPLES, FL 34103 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: EDWARD M. LIVINGSTON

03/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ARCHAMBAULT, JEFFREY A  
Address: 14989 MAHOE COURT  
City-St-Zip: FORT MYERS, FL 33908

Title: VP ( ) Delete  
Name: ARCHAMBAULT, JOSEPH C  
Address: 868 INDIANA AVENUE  
City-St-Zip: FORT MYERS, FL 33919

Title: S,T ( ) Delete  
Name: GIORDANI, ROSEANNE  
Address: 2340 PERIWINKLE WAY, UNIT M-1  
City-St-Zip: SANIBEL, FL 33957

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: ARCHAMBAULT, JOSEPH C  
Address: 868 INDIANA AVENUE  
City-St-Zip: FORT MYERS, FL 33919

Title: VPST (X) Change ( ) Addition  
Name: WOLFSFELD, JULENE K  
Address: 12371 COCONUT CREEK COURT  
City-St-Zip: FORT MYERS, FL 33908

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JEFFREY A. ARCHAMBAULT

P

03/08/2007

Electronic Signature of Signing Officer or Director

Date