

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000084354

FILED
May 04, 2005
Secretary of State

Entity Name: STUFF THIS INC.

Current Principal Place of Business:

1592 SE VILLAGE GREEN DR
SUITE E
PORT ST LUCIE, FL 34952 US

New Principal Place of Business:

Current Mailing Address:

1592 SE VILLAGE GREEN DR
SUITE E
PORT ST LUCIE, FL 34952 US

New Mailing Address:

FEI Number: 34-2010499 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINSTON, LAURA J
525 SW WORCESTER LANE
PORT ST LUCIE, FL 34953 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DERMOTT, GEORGE R JR
Address: 1592 SE VILLAGE GREEN DR
City-St-Zip: PORT ST LUCIE, FL 34952 US

Title: VP () Delete
Name: DERMOTT, STEVE J
Address: 2635 SW CACTUS CIR
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: TRES () Delete
Name: WINSTON, LAURA J
Address: 525 SE WORCESTER LANE
City-St-Zip: PORT ST LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: STEVE DERMOTT

VP

05/04/2005

Electronic Signature of Signing Officer or Director

_____ Date