

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-01-2005 90010 017 ***150.00

DOCUMENT # P04000097983			
1. Entity Name ANNIE'S SUB SHOP, INC.			
Principal Place of Business 4125 CLEVELAND AVENUE # 96A FT. MYERS, FL 33901 US		Mailing Address 11750 SW 95TH AVENUE MIAMI, FL 33176 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
5. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ITTERLEY, BARBARA A 144 VERMONT AVENUE FT MYERS, FL 33905		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>Barbara A. Itterley</u> DATE: <u>3/18/05</u> (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reappointing)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ITTERLEY, BARBARA A	NAME	
STREET ADDRESS	144 VERMONT AVENUE	STREET ADDRESS	
CITY- ST- ZIP	FT MYERS, FL 33905	CITY- ST- ZIP	
TITLE	VP ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ITTERLEY, BARBARA A	NAME	
STREET ADDRESS	144 VERMONT AVENUE	STREET ADDRESS	
CITY- ST- ZIP	FT MYERS, FL 33905	CITY- ST- ZIP	
TITLE	S ☒ Delete	TITLE	☐ Change ☒ Addition
NAME	ITTERLEY, BARBARA A	NAME	ITTERLEY, David
STREET ADDRESS	144 VERMONT AVENUE	STREET ADDRESS	144 VERMONT AVENUE
CITY- ST- ZIP	FT MYERS, FL 33905	CITY- ST- ZIP	FT MYERS, FL 33905
TITLE	T ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ITTERLEY, BARBARA A	NAME	
STREET ADDRESS	144 VERMONT AVENUE	STREET ADDRESS	
CITY- ST- ZIP	FT MYERS, FL 33905	CITY- ST- ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other live empowered			
SIGNATURE: <u>Barbara A. Itterley</u>		DATE: <u>3/18/05</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	

00011144



03112005 Chg-P CR2E034 (10/03)

4. FEI Number 20-1302034 Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required