2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2005
Secretary of State

DOCUMENT# P04000107348

Entity Name: THE DARKHOUSE PRESS INCORPORATED

Current Principal Place of Business:

240 GALEN DRIVE
SUITE 209
KEY BISCAYNE, FL 33149 US

New Principal Place of Business:

Current Mailing Address:

240 GALEN DRIVE
SUITE 209
KEY BISCAYNE, FL 33149 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TABER, PETER
240 GALEN DRIVE
SUITE 209
KEY BISCAYNE, FL 33149 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TABER, PATRICK
Address: 291 GOLDSMITH ST.
City-St-Zip: LITTLETON, MA 01460 US

Title: VP ( ) Delete
Name: TABER, PETER
Address: 240 GALEN DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: D ( ) Delete
Name: ALLEN, GORDON
Address: 3939 OCEAN DRIVE, PH 9C
City-St-Zip: VERO BEACH, FL 32960 US

Title: S/TR ( ) Delete
Name: TABER, MARY M
Address: 240 GALEN DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

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:

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: PETER TABER VP 02/08/2005
Electronic Signature of Signing Officer or Director Date