

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000133050

Entity Name: XTRA ATTIC, INC.

FILED  
Apr 29, 2005  
Secretary of State

## Current Principal Place of Business:

106 JULIA ST.  
TITUSVILLE, FL 32796

## New Principal Place of Business:

106 JULIA ST.  
TITUSVILLE, FL 32796 US

## Current Mailing Address:

106 JULIA ST.  
TITUSVILLE, FL 32796

## New Mailing Address:

106 JULIA ST.  
TITUSVILLE, FL 32796 US

FEI Number: 84-1661658

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JEN-LEE DEVELOPMENT, INC.  
106 JULIA ST.  
TITUSVILLE, FL 32796 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: WILLIAM, ARNOFF  
Address: 106 JULIA ST.  
City-St-Zip: TITUSVILLE, FL 32796 US

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: WILLIAM, ARNOFF  
Address: 106 JULIA ST.  
City-St-Zip: TITUSVILLE, FL 32796 US

Title: P ( ) Change (X) Addition  
Name: RHOADES, LARRY F  
Address: 106 JULIA ST  
City-St-Zip: TITUSVILLE, FL 32796 US

Title: SEC ( ) Change (X) Addition  
Name: WALKER, CINDY L  
Address: 106 JULIA ST  
City-St-Zip: TITUSVILLE, FL 32796 US

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 ARNOFF

VP

04/29/2005

Electronic Signature of Signing Officer or Director

Date