

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000156490

Entity Name: THREE LITTLE LUFBERRYS, INC

FILED
Jun 30, 2005
Secretary of State

Current Principal Place of Business:

801 SOUTH UNIVERSITY DRIVE
A129
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

801 SOUTH UNIVERSITY DRIVE
A129
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 65-1237003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMER, COLLEEN
801 SOUTH UNIVERSITY DRIVE
A129
PLANTATION, FL 33324 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, S () Delete
Name: RAMER, COLLEEN
Address: 801 SOUTH UNIVERSITY, SUITE 129
City-St-Zip: PLANTATION, FL 33324

Title: VP, () Delete
Name: RAMER, MARK
Address: 801 SOUTH UNIVERSITY DRIVE
City-St-Zip: PLANTATION, FL 33324

Title: VP () Delete
Name: JENSEN, DARLENE
Address: 801 SOUTH UNIVERSITY DRIVE
City-St-Zip: PLANTATION, FL 33324

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: COLLEEN RAMER

PS

06/30/2005

Electronic Signature of Signing Officer or Director

Date