

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000163364

FILED
Apr 28, 2005
Secretary of State

Entity Name: MOORE CUSTOM CATERING INC

Current Principal Place of Business:

216 MANTE DRIVE
KISSIMMEE, FL 34743 US

New Principal Place of Business:

4755 HOWELL BRANCH ROAD
WINTER PARK, FL 32792 US

Current Mailing Address:

P O BOX 771947
ORLANDO, FL 328371947 US

New Mailing Address:

FEI Number: 20-1962685 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELSHAW, CATHY
5206 DESMOND LANE
ORLANDO, FL 32821 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: PRES () Delete
Name: MOORE, BARBARA A
Address: 216 MANTE DRIVE
City-St-Zip: KISSIMMEE, FL 34743 US

Title: D () Delete
Name: FELSHAW, CATHY
Address: 5206 DESMOND LANE
City-St-Zip: ORLANDO, FL 32821 US

Title: D () Delete
Name: NELSON, STEPHANIE
Address: 216 MANTE DRIVE
City-St-Zip: KISSIMMEE, FL 34743 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: FELSHAW, CATHY
Address: 5206 DESMOND LANE
City-St-Zip: ORLANDO, FL 32821 US

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: CATHY FELSHAW

VP

04/28/2005

Electronic Signature of Signing Officer or Director

Date