2006 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)** 

## Mar 27, 2006 8:00 am Secretary of State **DOCUMENT # P05000100381** 03-14-2006 90013 023 \*\*\*158.75 1. Entity Name THE TRUMP SISTERS, INC. 66007140 Principal Place of Business Mailing Address 10496 W HALLS RIVER RD HOMOSASSA FL 34448 10496 W HALLS RIVER RD HOMOSASSA FL 34448 1st MOORE CR2E034 (10/05) 4. FEI Number 52 4856 **Z**dv & State Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) INDA BELDEN, CAROLYN E 10496-W HALLS RIVER RD HOMOSASSA FL 34448 ement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accept MICKLANA FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00-Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10 11. ADDITIONS/CHANGES TO OFFICERS AND DIF Delete Change TITLE CEGG TITLE ☐ Addition BELDEN, CAROLYN E NAME CELAND COURT STREET ADORESS 10496 W HALLS RIVER RD STREET ADDRESS HOMOSASSA EL 24448 CITY-ST-ZIP Change ☐ Delete TITLE ☐ Addition STRICKLAND; LINDA MAN NAME STREET ADDRESS 10496 W HALLS RIVER RD STREET ADDRESS City-SI-7IP HOMOSASSA FE 34448 CITY-ST-7IP TITLE ☐ Detale TITLE--- Change --- Addition MAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-71P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition MANAG NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IIDE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Delete TITLE TL₹L € Change Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report of supplemental report is type 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 of the program of the program of the corporation of the transfer of the program of th

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## ATTACHMENT 66001140

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 16, 2006

THE TRUMP SISTERS, INC. 5943 W. OAK PARK BLVD HOMOSASSA, FL 34446

Subject: THE TRUMP SISTERS, INC.

Reference Number:

P05000100381

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$158.75; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cd ANNUAL REPORTS SECTION