

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000048492

FILED  
Apr 13, 2005  
Secretary of State

Entity Name: PARTY CITY OF ALTAMONTE SPRINGS, INC.

## Current Principal Place of Business:

1140 E ALTAMONTE DR  
SUITE 1003  
ALTAMONTE SPRINGS, FL 32701 50

## New Principal Place of Business:

## Current Mailing Address:

1140 E ALTAMONTE DR  
SUITE 1003  
ALTAMONTE SPRINGS, FL 32701

## New Mailing Address:

FEI Number: 59-3193624

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DENOLA, ALLAN M  
481 WOLDUNN CIRCLE  
LAKE MARY, FL 32746 US

## Name and Address of New Registered Agent:

DENOLA, ALLAN M  
4072 BERMUDA GROVE PLACE  
LONGWOOD, FL 32779 US

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: ALLAN M DENOLA

04/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DENOLA, ALLAN  
Address: 481 WOLDUNN CIRCLE  
City-St-Zip: LAKE MARY, FL 32746

Title: V ( ) Delete  
Name: DENOLA, KATHLEEN M  
Address: 481 WOLDUNN CIRCLE  
City-St-Zip: LAKE MARY, FL 32746

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DENOLA, ALLAN  
Address: 4072 BERMUDA GROVE PLACE  
City-St-Zip: LONGWOOD, FL 32779

Title: V (X) Change ( ) Addition  
Name: DENOLA, KATHLEEN M  
Address: 4072 BERMUDA GROVE PLACE  
City-St-Zip: LONGWOOD, FL 32779

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: ALLAN M. DENOLA

PRES

04/13/2005

Electronic Signature of Signing Officer or Director

Date