


FILED

Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000052659

1. Entity Name
CALLIGRAPHER'S INK, INC.





Principal Place of Business	Mailing Address
345 EDEN TRAIL LAKE MARY, FL 32746	345 EDEN TRAIL LAKE MARY, FL 32746



01232005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3195180	Applied For	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent	
FINK, JOANNE 345 EDEN TRAIL LAKE MARY, FL 32746	

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

<p>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</p>	<p>9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/></p>	<p>\$5.00 May Be Added to Fees</p>
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10.		OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FINK, JOANNE C 345 EDEN TRAIL LAKE MARY, FL 32746	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TRATTNER, ANDREW M 345 EDEN TRAIL LAKE MARY, FL 32746	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

UNCLASSIFIED
14-00000-80122-015 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: ANDREW TRATTNER 1/24/05 407-343-3773