

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000063210 1. Entity Name INNOVATIVE PRINTING, INC.	
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Principal Place of Business 4700 PARKWAY COMMERCE BLVD BUILDING 605 STE. A ORLANDO, FL 32808	Mailing Address 4700 PARKWAY COMMERCE BLVD BUILDING 605 STE. A ORLANDO, FL 32808
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04112005 No Chg-P CR2E034(10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3200098	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, RICHARD W.
112 N FLORIDA AVE
DELAND, FL 32720

**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 _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

1100000307349
04/15/05-80050-015 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WINKELSAS, LAYNEA 449 WHISPERING OAK LANE APOKA, FL 32712
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 1907(3)(f), Florida Statutes. I further certify that the information indicated on the 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 filers empowered.

SIGNATURE: _____

Layne Winkelsas
LAYNE WINKELSAS
PRESIDENT

4/11/05 407 293 8777

Date

Daytime Phone #