

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000049145

Entity Name: MAGNOLIA COLOR, INC.

FILED
Jan 20, 2005
Secretary of State

Current Principal Place of Business:

5027 HIGHWAY 17-92
CASSELBERRY, FL 32707

New Principal Place of Business:

7016 HAMMOCK WAY
WINTER PARK, FL 32792

Current Mailing Address:

5027 HIGHWAY 17-92
CASSELBERRY, FL 32707

New Mailing Address:

324 LAKE GEORGE ROAD
OLD FORT, NC 28762

FEI Number: 59-3258749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASMAN, ROBERT J
5027 HWY 17-92
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

WASMAN, ROBERT J
7016 HAMMOCK WAY
WINTER PARK, FL 32792 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:

01/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: WASMAN, ROBERT J
Address: 1036 CHOKE CHERRY DR
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VPD () Delete
Name: WASMAN, CANDACE L
Address: 1036 CHOKECHERRY DR
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change () Addition
Name: WASMAN, ROBERT J
Address: 324 LAKE GEORGE ROAD
City-St-Zip: OLD FORT, NC 28762

Title: VPD (X) Change () Addition
Name: WASMAN, CANDACE L
Address: 324 LAKE GEORGE ROAD
City-St-Zip: OLD FORT, NC 28762

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: ROBERT J. WASMAN

CPD

01/20/2005

Electronic Signature of Signing Officer or Director

Date