

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000008341

Entity Name: R.A.U.T., INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

498 PALM SPRINGS DRIVE
SUITE 100
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

498 PALM SPRINGS DRIVE
100
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

498 PALM SPRINGS DRIVE
SUITE 100
ALTAMONTE SPRINGS, FL 32701

FEI Number: 59-3451587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WETTACH, JOSEPH C.L.
315 EAST ROBINSON STREET
SUITE 600
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

SHUFFIELD, W. CHARLES
SHUFFIELD, LOWMAN & WILSON, P.A.
1000 LEGION PLACE, SUITE 1700
ORLANDO, FL 32801 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: W. CHARLES SHUFFIELD

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VU, HOA M
Address: 498 PALM SPRINGS DRIVE, SUITE 100
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: P (X) Delete
Name: VU, HOA M
Address: 498 PALM SPRINGS DRIVE, SUITE 100
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: VU, HOA M
Address: 498 PALM SPRINGS DRIVE, SUITE 100
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HOA M. VU

DP

04/25/2005

Electronic Signature of Signing Officer or Director

Date