

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000068248

Entity Name: CAROB, TOO, INC.

FILED  
Apr 22, 2005  
Secretary of State

## Current Principal Place of Business:

3410 KILDEER PLACE  
PALM HARBOR, FL 346851228

## New Principal Place of Business:

2956 MEADOW HILL DR.  
CLEARWATER, FL 33761

## Current Mailing Address:

3410 KILDEER PLACE  
PALM HARBOR, FL 346851228

## New Mailing Address:

2956 MEADOW HILL DR.  
CLEARWATER, FL 33761

FEI Number: 59-3395340

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HETTIG, FARRELL N.  
1703 LAFOREST AVENUE  
SAFETY HARBOR, FL 34695 US

## Name and Address of New Registered Agent:

HETTIG, FARRELL N.  
2956 MEADOW HILL DR.  
CLEARWATER, FL 33761 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: FARRELL HETTIG

04/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GRESSMAN, BERT A  
Address: 3410 KILDEER PLACE  
City-St-Zip: PALM HARBOR, FL 346851228

Title: VPT ( ) Delete  
Name: HETTIG, FARRELL  
Address: 1703 LAFOREST AVENUE  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: S ( ) Delete  
Name: HETTIG, KATHERINE  
Address: 1703 LAFOREST AVENUE  
City-St-Zip: SAFETY HARBOR, FL 34695

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPT (X) Change ( ) Addition  
Name: HETTIG, FARRELL  
Address: 2956 MEADOW HILL DR  
City-St-Zip: CLEARWATER, FL 33761

Title: S (X) Change ( ) Addition  
Name: HETTIG, KATHERINE  
Address: 2956 MEADOW HILL DR  
City-St-Zip: CLEARWATER, FL 33761

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: FARRELL HETTIG

VP

04/22/2005

Electronic Signature of Signing Officer or Director

Date