

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000005550

FILED
Jan 26, 2007
Secretary of State

Entity Name: COOKIES BY DESIGN OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

600 EAST ALTAMONTE DRIVE
SUITE 1799
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

515 MANDAN CT
LAKE MARY, FL 32746 US

Current Mailing Address:

600 EAST ALTAMONTE DRIVE
SUITE 1700
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

515 MANDAN CT
LAKE MARY, FL 32746 US

FEI Number: 59-3500278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOVALE, STEVEN PRES
600 EAST ALTAMONTE DRIVE
SUITE 1700
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

DOVALE, STEVEN PRES
515 MANDAN CT
LAKE MARY, FL 32746 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: STEVEN DOVALE

01/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: DOVALE, STEVEN
Address: 515 MANDAN CT
City-St-Zip: LAKE MARY, FL 32746

Title: VPS () Delete
Name: DOVALE, JO ANNE
Address: 515 MANDAN CT
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DOVALE, STEVEN
Address: 515 MANDAN CT
City-St-Zip: LAKE MARY, FL 32746 US

Title: VPS (X) Change () Addition
Name: DOVALE, JO ANNE
Address: 515 MANDAN CT
City-St-Zip: LAKE MARY, FL 32746 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: STEVEN DOVALE

PRES

01/26/2007

Electronic Signature of Signing Officer or Director

Date