

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000007714

FILED
Apr 14, 2005
Secretary of State

Entity Name: RIGHTSIZING UNLIMITED, INC.

Current Principal Place of Business:

45113 SNICKERS TRAIL
NASSAU, FL 32011

New Principal Place of Business:

Current Mailing Address:

45113 SNICKERS TRAIL
NASSAU, FL 32011

New Mailing Address:

FEI Number: 59-3209088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EBY, TERRY L
45113 SNICKERS TRAIL
CALLAHAN, FL 32011 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EBY, TERRY L
Address: 45113 SNICKERS TRAIL
City-St-Zip: CALLAHAN, FL 32011

Title: VP () Delete
Name: EBY, MARILYN J
Address: 45113 SNICKERS TRAIL
City-St-Zip: CALLAHAN, FL 32011

Title: T () Delete
Name: EBY, TERRY L
Address: 45113 SNICKERS TRAIL
City-St-Zip: CALLAHAN, FL 32011

Title: S () Delete
Name: EBY, MARILYN J
Address: 45113 SNICKERS TRAIL
City-St-Zip: CALLAHAN, FL 32011

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: S (X) Change () Addition
Name: HERSEY, NAOMI M
Address: 45113 SNICKERS TRAIL
City-St-Zip: CALLAHAN, FL 32011

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: TERRY L. EBY

P

04/14/2005

Electronic Signature of Signing Officer or Director

Date