

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000010027

FILED  
Apr 18, 2005  
Secretary of State

Entity Name: EVENTS UNLIMITED OF CENTRAL FLORIDA, INC.

## Current Principal Place of Business:

5618 MARY'S VILLA RD.  
GROVELAND, FL 34736

## New Principal Place of Business:

1065 MAGNOLIA  
CLERMONT, FL 34711

## Current Mailing Address:

5618 MARY'S VILLA RD.  
GROVELAND, FL 34736

## New Mailing Address:

P.O. BOX 120222  
CLERMONT, FL 34712

FEI Number: 59-3491456

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JACKSON, MARY  
5618 MARY'S VILLA RD.  
GROVELAND, FL 34736 US

## Name and Address of New Registered Agent:

JACKSON, MARY  
1065 MAGNOLIA  
CLERMONT, FL 34711 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:

04/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JACKSON, MARY  
Address: 5618 MARY'S VILLA RD.  
City-St-Zip: GROVELAND, FL 34736

Title: D ( ) Delete  
Name: KETCH, GAIL  
Address: 510 SHADY NOOK DR.  
City-St-Zip: CLERMONT, FL 34711

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: JACKSON, MARY  
Address: 1065 MAGNOLIA  
City-St-Zip: CLERMONT, FL 34711

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: GAIL L. KETCH

VP

04/18/2005

Electronic Signature of Signing Officer or Director

Date