

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 28, 2005 8:00 am**  
**Secretary of State**

02-28-2005 90197 023 \*\*\*150.00

**DOCUMENT # P98000028662**

1. Entity Name  
**RUTH A. SANDBERGEN, INC.**



Principal Place of Business  
**2856 ALLAPATTAH DRIVE  
CLEARWATER, FL 33761**

Mailing Address  
**2856 ALLAPATTAH DRIVE  
CLEARWATER, FL 33761**



2. Principal Place of Business  
**2070 World Parkway Blvd**

3. Mailing Address  
**2070 World Parkway Blvd**

Suite, Apt. #, etc.  
**#18**

Suite, Apt. #, etc.  
**#18**

02132005 Chg-P CR2E034 (10/03)

City & State  
**Clearwater, FL**

City & State  
**Clearwater, FL**

4. FEI Number  
**59-3500873**

Applied For  
☐ Not Applicable

Zip  
**33763**

Country

Zip  
**33763**

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SANDBERGEN, RUTH A  
2856 ALLAPATTAH DRIVE  
CLEARWATER, FL 33761**

Name  
**Ruth A. Sandbergen**

Street Address (R.O. Box Number is Not Acceptable)  
**2070 World Parkway Blvd**

**#18**

City  
**Clearwater**

**FL 33763**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Ruth A. Sandbergen*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

*2/21/05*  
DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
SANDBERGEN, RUTH A  
2856 ALLAPATTAH DRIVE  
CLEARWATER, FL 33761** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Sandbergen, Ruth A  
2070 World Parkway Blvd #18  
Clearwater, FL 33763** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Ruth A. Sandbergen*

*2/21/05* *727-725-9642*