


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 08:00 AM
Secretary of State

| | |
|-----------------------------------|---|
| DOCUMENT # P98000038680 |  |
| 1. Entity Name PAPILLION, INC. | |

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| Principal Place of Business 925 SOUTH BUSINESS 41 VENICE, FL 34285 | Mailing Address 925 SOUTH BUSINESS 41 VENICE, FL 34285 |
|--|--|

DO NOT WRITE IN THIS SPACE



01122005 No Chg-P CR2E034 (10/03)

| | |
|--|-------------------------------|
| 4. FEI Number 65-0837656 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

STEPHEN F. VOIGHT, P.A.
2414 BEE RIDGE ROAD
SARASOTA, FL 34239

DO NOT WRITE
IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

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|---|---|
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|---|

10. OFFICERS AND DIRECTORS

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|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | P CORCORAN, GLENNA GLORIA 5862 CARRIAGE DR SARASOTA, FL 34243 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | V CORCORAN, GEORGE KENDALL 5862 CARRIAGE DR SARASOTA, FL 34243 |
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1100000183386
01/19/05-80064-023 150.00

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: Glenna G. Corcoran Glenna G. Corcoran 1-13-05 941-488-1666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #