## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000062639

Entity Name: FIDDLER'S REST, INC.

FILED Jan 20, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

HC 61 BOX 28 HWY 358 5800 S.W. 358 HIWAY

STEINHATCHEE, FL 32359 STEINHATCHEE, FL 32359 US US

**Current Mailing Address: New Mailing Address:** 

5800 S.W. 358 HIWAY HC 61 BOX 28

STEINHATCHEE, FL 32359 US STEINHATCHEE, FL 32359 US

FEI Number: 59-3539950 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLETCHER, CARL D FLETCHER, CARL D HC 61 BOX 28 HWY 358 5800 S.W. 358 HIWAY

STEINHATCHEE, FL 32359 US STEINHATCHEE, FL 32359 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: 01/20/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete FLETCHER, BILLIE JO Name:

HC 61 BOX 28 HWY 358 Address: City-St-Zip: STEINHATCHEE, FL 32359

Title: VTD () Delete Name: FLETCHER, CARL D HC 61 BOX 28 HWY 358 Address: STEINHATCHEE, FL 32359

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition

FLETCHER, BILLIE JO Name: 5800 S.W. 358 HIWAY Address: City-St-Zip: STEINHATCHEE, FL 32359

Title: VTD (X) Change ( ) Addition

Name: FLETCHER, CARL D Address: 5800 S.W. 358 HIWAY STEINHATCHEE, FL 32359 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: BILLIE JO FLETCHER **PSD** 01/20/2005