## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000108261

Entity Name: HAYS CASH DESIGN STUDIOS, INC.

FILED Apr 18, 2005 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

26119 TROON AVE

MOUNT PLYMOUTH, FL 32776

Current Mailing Address: New Mailing Address:

26119 TROON AVE

MOUNT PLYMOUTH, FL 32776

FEI Number: 59-3554938 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:

HAYS, DOUG CASH, PENNY 26119 TROON AVE 26119 TROON AVE

MOUNT PLYMOUTH, FL 32776 US MOUNT PLYMOUTH, FL 32776 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: PENNY CASH 04/18/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 CASH, PENNY
 Name:
 CASH, PENNY

 Address:
 26119 TROON AVE
 Address:
 26119 TROON AVE

City-St-Zip: MOUNT PLYMOUTH, FL 32776 City-St-Zip: MOUNT PLYMOUTH, FL 32776

Title: D () Delete Title: () Change () Addition

 Name:
 HAYS, DOUG
 Name:

 Address:
 26119 TROON AVE
 Address:

 City-St-Zip:
 MOUNT PLYMOUTH, FL 32776
 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: PENNY CASH P 04/18/2005