## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000049290

Entity Name: T.O. MANIJEACTURING CORPORATION

FILED Apr 21, 2005 Secretary of State

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Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
2156 - 10T SARASOT	TH ST. TA, FL 34237					
Current Mailing Address:			New Mailing Address:			
2156 - 10T SARASOT	TH ST. TA, FL 34237					
FEI Number: 65-0925606 FEI Number Applied For ( )			FEI Number Not Applicable ( ) Certificate of Status Desired ( )			
Name and	l Address of C	urrent Registered Agent:	Name and	l Address	of New Registered Agent:	
2156 - 10T	N, K. SCOTT TH ST. A, FL 34237	US				
	e named entity s e of Florida.	ubmits this statement for the p	urpose of changing	its register	red office or registered agent, or both,	
SIGNATUI	RE:					
	Electroni	c Signature of Registered Age	nt		Date	
Election Car	mpaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () KAUFFMAN, K.: 1645 FOX CRES SARASOTA, FL	EK DR	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V () SHUE, RICHARI 2546 RIVER RIE SARASOTA, FL	GE DR	Title: Name: Address: City-St-Zip:		(X) Change()Addition CHARD ER RIDGE DR FA, FL 34239	
Title: Name: Address: City-St-Zip:	V () SHUE, LARRY 7030 RICHARDS SARASOTA, FL		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S (X) PEACHEY, TRO 6097 PINE BRID ARCADIA, FL 3	GE DR.	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address:	T () SHUE, MIKE 7115 INDIAN BO	Delete VW LN	Title: Name: Address:		( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: K. SCOTT KAUFFMAN P 04/21/2005

SARASOTA, FL 34240

City-St-Zip: