## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 27, 2005 8:00 am Secretary of State DOCUMENT # P99000059220 - \* 1. Entity Name 04-27-2005 90343 029 \*\*\*150.00 JUDY'S 14-K GOLD, INC. Principal Place of Business Mailing Address 105 E GREEN STREET P.O. BOX 1886 **PERRY FL 32347 PERRY FL 32348** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 59-3591110 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PATE, DAVID T JR. 105 E GREEN STREET Street Address (P.O. Box Number is Not Acceptable) **PERRY FL 32347** Zip Code 32347 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 FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE Addition ☐ Delete PATE, DAVID T JR. NAME NAME 1974 N US HWY 221 PERRY FL 32347 105 E GREEN STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PERRY FL 32347 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition PATE, EDWINA G NAME NAME 105 E GREEN STREET 1974 N US HWY 221 PERRY FL 32347 STREET ADDRESS STREET ADDRESS PERRY FL 32347 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DILE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITE F ☐ Defete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY - ST - ZIP TITLE ☐ Delete TATLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

**FILED** 

US DAVID T. PATE, JR. APRIZE 2005 850-584-3669
OFFICER OR DIRECTOR
Dayline Phone # SIGNATURE:

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.