


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 14, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P99000069500	
1. Entity Name DEBBIE/LYNN CORPORATION	

Principal Place of Business 1002 CORAL COURT BOYNTON BEACH, FL 33426	Mailing Address 1002 CORAL COURT BOYNTON BEACH, FL 33426
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01072005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0939816	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  MOSHIER, ROBERT R JR 1002 CORAL COURT BOYNTON BEACH, FL 33426
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**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable NOTE: Registered Agent signature required when reinstating DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

000000263514  
03/14/05-80095-020 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	D MOSHIER, ROBERT R JR 1002 CORAL COURT BOYNTON BEACH, FL 33426
TITLE NAME STREET ADDRESS CITY ST ZIP	D MOSHIER, LARNEY 111 SW 10TH COURT BOYNTON BEACH, FL 33426
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Robert R Moshier* 3/14/05 561-364-1812  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR