

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 28, 2005 8:00 am**  
**Secretary of State**

01-28-2005 90030 003 \*\*\*158.75

DOCUMENT # P99000097083

1. Entity Name

FERRELL SANFORD STUDIO, INC.



Principal Place of Business

2021 W. FIRST ST  
FORT MYERS FL 33901

Mailing Address

2021 W. FIRST ST  
FORT MYERS FL 33901

50007740

2. Principal Place of Business

1473 BARCELONA AVE

3. Mailing Address

1473 BARCELONA AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



1st MOORE

CR2E034 (10/04)

City & State

FORT MYERS FL

City & State

FORT MYERS FL

4. FEI Number

65-0963177

Applied For

Not Applicable

Zip

33901

Country

USA

Zip

33901

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SANFORD, ROBERT E  
2021 W. FIRST ST  
FORT MYERS FL 33901

7. Name and Address of New Registered Agent

Name ROBERT SANFORD

Street Address (P.O. Box Number is Not Acceptable)

1473 BARCELONA AVENUE

City FORT MYERS

FL

Zip Code 33901

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

ROBERT SANFORD

01.22.04

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

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME SANFORD, ROBERT E  
STREET ADDRESS 2021 WEST FIRST STREET  
CITY-ST-ZIP FORT MYERS FL 33901

TITLE D ☐ Delete  
NAME FERRELL, TONI L  
STREET ADDRESS 2021 WEST FIRST STREET  
CITY-ST-ZIP FORT MYERS FL 33901

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1473 BARCELONA AVENUE  
CITY-ST-ZIP FORT MYERS FL 33901

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1473 BARCELONA AVENUE  
CITY-ST-ZIP FORT MYERS FL 33901

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE:

ROBERT SANFORD

01.22.04 239 334 3832

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #