2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000103594

Address:

City-St-Zip:

60 HARVEY DRIVE

PARAMUS, NJ 07652

Entity Name: ST. PETERSBURG WET WILLIES, INC.

FILED Feb 23, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
BAY WAL ST. PETE	K #A208 RSBURG, FL	33139			
Current Mailing Address:			New Mailing Address:		
P.O. BOX SAVANNA	60127 AH, GA 31420				
FEI Number	: 59-3620541	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address of	of New Registered Agent:	
2141 W C ORLANDO	ROBERT N HURCH ST D, FL 32805	US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU					
	Electron	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	D/P (STERN, ROBE 2141 W CHUR ORLANDO, FL	CH ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DST (DICKINSON, W 106 DUTCH IS SAVANNAH, GA	LAND DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D/VP (STACHEL, DAV 11 ISLAND AVI MIAMI BEACH,	ENUE, PH2	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D/VP (STACHEL, ERI 2845 LOOKOU ATLANTA, GA	T PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D/VP (DICKINSON, F) Delete RED J	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: WILLIAM DICKINSON DST 02/23/2005