## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000105201

Entity Name: CENTRAL FLORIDA GRAPHICS, INC. OF ORLANDO

FILED Apr 13, 2005 Secretary of State

Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:			
	T CENTRAL BI D, FL 32803	LVD.		423 WHITCOMB DR GENEVA, FL 32732			
Current N	lailing Addres	s:	New Mail	New Mailing Address:			
	T CENTRAL BI D, FL 32803	_VD.		423 WHITCOMB DR GENEVA, FL 32732			
FEI Number	: 59-3601949	FEI Number Applied For()	FEI Number Not App	olicable ( )	Certificate of Status Desi	red()	
Name and	d Address of C	urrent Registered Agent:	Name and	d Address of	New Registered Agent	:	
2722 EAS	JAMES W JR. T CENTRAL BI D, FL 32803	LVD US	423 WHIT	ATWELL, JAMES W JR. 423 WHITCOMB DR GENEVA, FL 32732 US			
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing	its registered	office or registered agen	t, or both,	
SIGNATURE: JAMES W. ATWELL				04/13/2005			
	Electron	ic Signature of Registered Ag	ent		Date		
Election Ca	mpaign Financing	g Trust Fund Contribution ( ).					
OFFICER	S AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	V () ATWELL, JAME 423 WHITCOM GENEVA, FL 3	B DR.	Title: Name: Address: City-St-Zip:	(	) Change ()Addition		
Title: Name: Address: City-St-Zip:	D () ATWELL, LORI 162 A SPRING\ LONGWOOD, F	WOOD CIRCLE	Title: Name: Address: City-St-Zip:	ATWELL, LOI 162 A SPRING	X) Change()Addition RITA A GWOOD CIRCLE FL 32750 19		
Title: Name: Address: City-St-Zip:	COB ( ) ATWELL, PAUL P O BOX 95196 LAKEMARY, FL	51	Title: Name: Address: City-St-Zip:	COB ( ATWELL, PAU P O BOX 951 LAKEMARY, I	961		
Title: Name: Address: City-St-Zin:	( )	Delete	Title: Name: Address: City-St-Zin:	ATWELL, JUL 423 WHITCOI	MB DR.		

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.

SIGNATURE: JAMES W. ATWELL V 04/13/2005