

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000108859

Entity Name: PRO STORE, INC.

FILED
Mar 08, 2005
Secretary of State

Current Principal Place of Business:

224 WEST CENTRAL PARKWAY, #1024
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

769 BIG TREE DRIVE
LONGWOOD, FL 32750

Current Mailing Address:

224 WEST CENTRAL PARKWAY, #1024
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

769 BIG TREE DRIVE
LONGWOOD, FL 32750

FEI Number: 59-3680663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCHUGH, JOHN J JR
333 17TH STREET, STE U
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: WOODS, MICHAEL T
Address: 224 WEST CENTRAL PARKWAY, #1024
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DS () Delete
Name: WOODS, LOYDA M
Address: 136 HABERSHAM DRIVE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: WOODS, MICHAEL T
Address: 136 HABERSHAM DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL WOODS

DPT

03/08/2005

Electronic Signature of Signing Officer or Director

Date