## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S21511

FILED Jan 31, 2005 Secretary of State

Entity Name: TREASURE CHEST LONGWOOD/LAKE MARY, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	GE COURT OD, FL 32750				
Current Mailing Address:		New Mailing Addres	New Mailing Address:		
714 SAVA LONGWC	GE COURT OOD, FL 32750				
FEI Number	: 59-3049163	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	current Registered Agent:	Name and Address of	of New Registered Agent:	
NACKING					
714 SAVA LONGWC	GE CT OD, FL 32750 e named entity:		purpose of changing its registere	d office or registered agent, or both,	
714 SAVA LONGWC The above in the Stat	GE CT OD, FL 32750 a named entity of e of Florida.		purpose of changing its registere	d office or registered agent, or both,	
714 SAVA LONGWC	GE CT OD, FL 32750 named entity of florida.			d office or registered agent, or both,  Date	
714 SAVA LONGWC The above in the Stat SIGNATU	GE CT OD, FL 32750 e named entity : e of Florida. RE: Electror	submits this statement for the			
714 SAVA LONGWC The above in the Stat SIGNATU Election Ca	GE CT OD, FL 32750 e named entity : e of Florida. RE: Electror	submits this statement for the nic Signature of Registered Ag	gent		
714 SAVA LONGWC The above in the Stat SIGNATU Election Ca	GE CT DOD, FL 32750 e named entity is e of Florida.  RE: Electror mpaign Financing	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution ( ).  TORS: Delete T OURT	gent	Date	

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: ANN T. NACKINO PRES 01/31/2005