


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # S11053
 1. Entity Name
LOGGERS RUN UNLIMITED, INC.



Principal Place of Business Mailing Address
11379 W PALMETTO PARK RD **11379 W PALMETTO PARK RD**
BOCA RATON, FL 33428-2659 **BOCA RATON, FL 33428-2659**

DO NOT WRITE IN THIS SPACE



02012005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
65-0227722 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
WOTRING, CHARLES C.
20971 D VIA OLEANDER
BOCA RATON, FL 33428

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

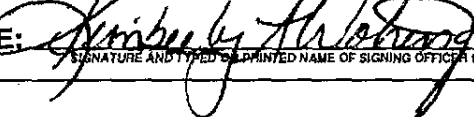
9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WOTRING, CHARLES C. 20971 D VIA OLEANDER BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WOTRING, KARIN A. 20971 D VIA OLEANDER BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WOTRING, KIMBERLY 22087 ALTONA DRIVE BOCA RATON, FL 33428
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000335807
 04/27/05-80091-021 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607.01(1), 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 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:  Date: **3-15-05** Daytime Phone #: **561-487-8665**