


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2006 08:00 AM
Secretary of State

DOCUMENT # F99000002091
 1. Entity Name
 NORTON LILLY INTERNATIONAL, INC.



Principal Place of Business ONE ST LOUIS CENTRE STE 3002 MOBILE, AL 36602	Mailing Address ONE ST LOUIS CENTRE STE 3002 MOBILE, AL 36602
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03222006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 63-1222618	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

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 _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 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	C RUTHERFORD, J. SCHLEY ONE SAINT LOUIS CENTER STE 3002 MOBILE, AL 36602
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO THURBER, H.W. III ONE SAINT LOUIS CENTER STE 3002 MOBILE, AL 36602
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ALLEN, RACHEL ONE SAINT LOUIS CENTER STE 3002 MOBILE, AL 36602
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 04/11/06-80103-005 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other links empowered.

SIGNATURE: 

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/06 1251219-33
 Date Daytime Phone #