


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # H44419
 1. Entity Name
 PMC, INC.



Principal Place of Business Mailing Address
 % DONNA F. PRICE % DONNA F. PRICE
 615 DREW STREET 615 DREW STREET
 CLEARWATER, FL 34615-4109 CLEARWATER, FL 34615-4109

DO NOT WRITE IN THIS SPACE



04182006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 59-2504013 Not Applicable

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

6. Name and Address of Current Registered Agent
 PRICE, DONNA F.
 615 DREW STREET
 CLEARWATER, FL 33515

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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.

NO CHANGE ~~Donna F. Price~~ ~~Donna F. Price~~ ~~4/18/06~~
 SIGNATURE DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when re-registering)

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	D
NAME	PRICE, STEPHEN P.
STREET ADDRESS	615 DREW STREET
CITY-ST-ZIP	CLEARWATER, FL
TITLE	VD
NAME	PRICE, DONNA F.
STREET ADDRESS	615 DREW STREET
CITY-ST-ZIP	CLEARWATER, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 05/03/06-80054-009 150.00

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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 other like empowered.

SIGNATURE: *Donna F. Price* **UP** **DONNA F PRICE** **4/18/06** **727 4465522**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #