

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L05982

FILED  
May 18, 2006  
Secretary of State

Entity Name: BARBOT, STEUART & ASSOCIATES, INC.

## Current Principal Place of Business:

3228 EVANS AVE.  
FORT MYERS, FL 33901

## New Principal Place of Business:

13861 PLANTATION ROAD  
SUITE 105  
FORT MYERS, FL 33912

## Current Mailing Address:

3228 EVANS AVE.  
FORT MYERS, FL 33901

## New Mailing Address:

13861 PLANTATION ROAD  
SUITE 105  
FORT MYERS, FL 33912

FEI Number: 65-0135198

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEUART, I K  
3228 EVANS AVE.  
FT. MYERS, FL 33901 US

## Name and Address of New Registered Agent:

STEUART, I K  
13861 PLANTATION ROAD  
SUITE 105  
FT. MYERS, FL 33912 US

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:

05/18/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: STEUART, I. K  
Address: 158 GULFVIEW ROAD  
City-St-Zip: PUNTA GORDA, FL

Title: VD ( ) Delete  
Name: BARDOT, DESI  
Address: P.O. BOX 1154 N/A  
City-St-Zip: FLORENCE, S. CAR.,

Title: STD ( ) Delete  
Name: SLISHER, DONALD  
Address: PO BOX 1495  
City-St-Zip: LEHIGH ACRES, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: STD (X) Change ( ) Addition  
Name: SLISHER, DONALD  
Address: PO BOX 1495  
City-St-Zip: LEHIGH ACRES, FL 33970

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: I.K. STEUART

PRES

05/18/2006

Electronic Signature of Signing Officer or Director

Date