


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 09, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000150242</b> 1. Entry Name <b>CARON ENTERPRISES OF TAMPA BAY, INC.</b>	
--	---

Principal Place of Business <b>1451 COASTAL PLACE DUNEDIN FL 34698 US</b>	Mailing Address <b>1451 COASTAL PLACE DUNEDIN FL 34698</b>
--	---



2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip      Country	3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip      Country	4. FEI Number <b>20-0454130</b>
---	---	------------------------------------

1st MOORE      CR2E034 (10/05)

5. Certificate of Status Desired <input type="checkbox"/>	Applied For Not Applicable
---	-------------------------------

**\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**CARON, DOUGLAS  
1451 COASTAL PLACE  
DUNEDIN FL 34698**

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City \_\_\_\_\_ **FL** Zip Code \_\_\_\_\_

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS		<input type="checkbox"/> Delete
TITLE	P	
NAME	CARON, DOUGLAS	
STREET ADDRESS	1451 COASTAL PLACE	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	VP	<input type="checkbox"/> Delete
NAME	CARON, TISA M	
STREET ADDRESS	1451 COASTAL PLACE	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	S	<input type="checkbox"/> Delete
NAME	CARON, TISA	
STREET ADDRESS	1451 COASTAL PLACE	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	T	<input type="checkbox"/> Delete
NAME	CARON, TISA	
STREET ADDRESS	1451 COASTAL PLACE	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	U00000461725		
NAME	03/21/06-80003-021 150.00		
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 like empowered.

SIGNATURE: Douglas J. Caron      Date: 3-5-06      Daytime Phone #: 727-798-8574