2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 20, 2006 08:00 AM Secretary of State

1. Entity Nam	MENT # P040000283 INTRACTING, INC.	301		Secretary of State	
Principal Plac 2353 N HWY HAINES CITY	27	Meiling Address PO BOX 1847 HAINES CITY, FL 33845	1	# AMMATINA AT AN ANNO MONTA MONTA ANNO MONTA MONTA ANNO MANTA ANNO MANTA ANNO MANTA ANNO MANTA ANNO MANTA ANNO	
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DO NOT WRITE IN THIS SPACE			CE	4. FEI Number 73-1692625 S. Certificate of Status Desired Applied For Not Applied \$8.75 Additional Fee Required	ble
	6. Name and Address of Current Ro	gistered Agent			, <u>1</u> ,2,7
ORISICH, JAMES R 2353 N HWY 27 HAINES CITY, FL 33845				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. It am familiar with, and accept the obligations of registered agent. Signature. Speak or printed name of registered agent and title if applicable. (NOTE Registered Agent signature registered when reinstating).					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			~ — ~~	5.00 May Be Ided to Fees	
TITLE	OFFICERS AND D	RECTORS			.,.
NAME Street Address City-St-Zip	ORISICH, JAMES R PO BOX 1847 HAINES CITY, FL 33845			000000519578 05/02/06-80058-018 150.00	#8 A,
TITLE NAME STREET ADDRESS CITY-ST-ZIP				05/02/06-80058-018 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					-
indicated of the cor	on this report or supplemental report is tr	ue and accurate and that my signa ered to execut e thi s report as requi	ture shall have the :	ed in Chapter 119, Florida Statutes. I further certify that the information a same legal effect as if made under oath; that I am an officer or direct 07, Florida Statutes, and that my name appears in Block 10 or Block 11	r

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