


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000075395

1. Entity Name
 1-800-PROBATE, INC.



Principal Place of Business 2317 N WICKHAM ROAD MELBOURNE, FL 32935	Mailing Address 2317 N WICKHAM ROAD MELBOURNE, FL 32935
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DO NOT WRITE IN THIS SPACE



01032006 No Chg-P CR2E034 (11/05)

4. FEI Number 41-2140048	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

COURTNEY-PETERSON, JOYCE
 2317 N WICKHAM ROAD
 MELBOURNE, FL 32935

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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

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	P PETERSON, CARL III 2317 N. WICKHAM RD. MELBOURNE, FL 32935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PETERSON, CHASE 4085 LAKE WASHINGTON RD MELBOURNE, FL 32934
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PETERSON, JOYCE 2317 N WICKHAM ROAD MELBOURNE, FL 32935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PETERSON, CARL IV 4085 LAKE WASHINGTON RD. MELBOURNE, FL 32935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000378541
 01/09/06-80011-006 150.00

U00000378541
 01/09/06-80011-007 8.75

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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 like empowered.

SIGNATURE: *Joyce Courtney Peterson* 1-3-06 321-2591601
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #