

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000076765

FILED
Mar 23, 2006
Secretary of State

Entity Name: MICHAEL G SCHUTTIG INC

Current Principal Place of Business:

15970 BAYSIDE POINTE WEST
SUITE 304
FORT MYERS, FL 33908

New Principal Place of Business:

2538 S.W. 29 TER.
CAPE CORAL, FL 33914

Current Mailing Address:

15970 BAYSIDE POINTE WEST
SUITE 304
FORT MYERS, FL 33908

New Mailing Address:

2538 S.W. 29 TER.
CAPE CORAL, FL 33914

FEI Number: 51-0508724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DALLAS, EDWARD A
17274 SAN CARLOS BLVD.
#202
FORT MYERS BEACH, FL 33931 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHUTTIG, MICHAEL D
Address: 220 NATURE VIEW CT.
City-St-Zip: FORT MYERS BEACH, FL 33931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHUTTIG, MICHAEL G
Address: 2538 S.W. 29 TER.
City-St-Zip: CAPE CORAL, FL 33914

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: MICHAEL G. SCHUTTIG

D

03/23/2006

Electronic Signature of Signing Officer or Director

_____ Date