

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000106500

Entity Name: ECKEL CORPORATION

FILED
Apr 03, 2006
Secretary of State

Current Principal Place of Business:

16714 TOBACCO ROAD
LUTZ, FL 33558

New Principal Place of Business:

Current Mailing Address:

16714 TOBACCO ROAD
LUTZ, FL 33558

New Mailing Address:

FEI Number: 01-0820407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ECKEL, RICHARD A
16714 TOBACCO ROAD
LUTZ, FL 33558 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: P () Delete
Name: ECKEL, THOMAS A
Address: 22814 ROBINS NEST CT
City-St-Zip: LAND O LAKES, FL 34639

Title: V () Delete
Name: ECKEL, RICHARD A
Address: 26714 AFFIRMED WAY
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: V () Delete
Name: ECKEL, JOANN M
Address: 15310 LAKE BELLA VISTA DR
City-St-Zip: TAMPA, FL 33625

Title: V () Delete
Name: ECKEL, JENNIFER M
Address: 15310 LAKE BELLA VISTA DR
City-St-Zip: TAMPA, FL 33625

Title: V () Delete
Name: RAMIREZ, MAX N
Address: 1245 BECKENHAM WAY
City-St-Zip: WESLEY, FL 33543

Title: PM () Delete
Name: ECKEL, JANIS M
Address: 16405 OFFENHAUER ROAD
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: JOANN M ECKEL

V

04/03/2006

Electronic Signature of Signing Officer or Director

Date