

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90117 008 ***150.00

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1. Entity Name

PENINSULA MANAGEMENT GROUP, INC.



Principal Place of Business

~~PMB 13 2828 S MCCALL RD STE 32~~
ENGLEWOOD FL 33224

Mailing Address

~~PMB 13 2828 S MCCALL RD STE 32~~
ENGLEWOOD FL 33224



2. Principal Place of Business

PMB 69 2828 S. McCall Rd
Suite, Apt. #, etc. SD. 32

3. Mailing Address

PMB 69 2828 S. McCall Rd, Ste. 32
Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

Englewood, FL

City & State

Englewood, FL

4. FEI Number

13-4287438

Applied For
Not Applicable

Zip

34224

Country

Charlotte

Zip

34224

Country

Charlotte

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GARDINER, STEPHEN R
PMB 13 2828 S MCCALL RD STE 32
ENGLEWOOD FL 33224

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

Stephen R Gardiner

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

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

TITLE PD ☐ Delete
NAME GARDINER, STEPHEN R
STREET ADDRESS PMB 13 2828 S MCCALL RD STE 32
CITY-ST-ZIP ENGLEWOOD FL 33224

TITLE VP ☒ Delete
NAME NORTH, JAMES
STREET ADDRESS PMB 13 2828 S MCCALL RD STE 32
CITY-ST-ZIP ENGLEWOOD FL 33224

TITLE ST ☐ Delete
NAME GARDINER, KAREN A
STREET ADDRESS PMB 13 2828 S MCCALL RD STE 32
CITY-ST-ZIP ENGLEWOOD FL 33224

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Stephen R Gardiner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/06
Date

941.698-1774
Daytime Phone #