## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 17, 2006 08:00 AM Secretary of State

DOCUMENT # P95000045843
1. Entity Name
MICHAEL C. MAYO, INC.



Principal Place of Business

SIGNATURE:

14923 SW MIKE MAYS RD BLOUNTSTOWN, FL 32424 Mailing Address

14923 SW MIKE MAYS RD BLOUNTSTOWN, FL 32424



	01122006	No Chg-P	CR2E034 (11/05)
OO NOT WRITE IN THIS SPACE			

El Number	_	Applied For
59-3321040	[ ·	Not Applicat

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MAYO, MICHAEL C 14923 SOUTHWEST MIKE MAYO ROAD BLOUNTSTOWN, FL 32424

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plans of registered agent	urpose of changing its registere	ed office or re	gistered agent, or bo	th, in the State of Florida. I am familiar with and accept	
5/0/10/10/10	Signature, typed or printed name of registered agent and little i	applicable (NOTE Registered	d Agent signature r	eculred when reinstating)	OATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finance     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000387545 01/19/06-80044-004 150 00	
10.	OFFICERS AND DIREC	CTORS	<u> </u>			
TITLE NAME STREET ADDRESS GITY-ST-ZIP	P MAYO, MICHAEL C 14923 SOUTHWEST MIKE MAYO RO BLOUNTSTOWN, FL 32424	ĄD		·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				ÎN 1	THIS SPACE	
TITLE NAME STREET ADDRESS GITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			·			
12. I hereby indicated of the corchanged	cerily that the information supplied with his fit on this report or supplemental report is the reportation or the receiver or trustee empowered, or on an attachment with an address, with or	iling does not qualify for the exe and accurate and that my signal to execute this report as requir to the like empowered	emptions con ture shall hav red by Chapt	tained in Chapter 11 e the same legal effe er 607, Florida Statuti	9. Florida Statutes: I further certify that the information of as if made under path, that I am an officer or director, es, and that my name appears in Block 10 or Block 11 if  ,	

SNIE OFFICER OR DIRECTOR