

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 07, 2006 8:00 am**  
**Secretary of State**

04-07-2006 90041 026 \*\*\*150.00

**DOCUMENT # 008039**

1. Entity Name  
**THE S. F. TRAVIS COMPANY**



Principal Place of Business  
**300 DELANNOY AVENUE  
COCOA, FL 32922**

Mailing Address  
**DRAWER 490  
COCOA, FL 32923-0490**

**DO NOT WRITE IN THIS SPACE**



01242006 No Chg-P CR2E034 (11/05)

4. FEI Number  
**59-0485220**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**OSBORNE, T M  
300 DELANNOY AVE  
COCOA, FL 32922**

**DO NOT WRITE  
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**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  
**DPM  
OSBORNE, T M  
300 DELANNOY AVENUE  
COCOA, FL 32922**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
OSBORNE, REBECCA H  
300 DELANNOY AVENUE  
COCOA, FL 32922**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
OSBORNE, MERRILL J  
300 DELANNOY AVE  
COCOA, FL 32922**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
OSBORNE, ANNE  
300 DELANNOY AVENUE  
COCOA, FL 32922**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
OSBORNE, MARY NELLE  
300 DELANNOY AVENUE  
COCOA, FL 32922**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**S  
DEMPSEY, DONNA  
300 DELANNOY AVENUE  
COCOA, FL 32922**

**DO NOT WRITE  
IN THIS SPACE**

*(see attachment)*

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*3/22/06*

ATTACHMENT  
THE

20026375  
#008039

ESTABLISHED  
1885

TEL: (321) 636-1441  
FAX: (321) 636-1725



300 DELANNOY AVENUE  
32922

*Cocoa, Fla.*

DRAWER 490  
32923-0490

ATTACHMENT TO #10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	NOETZEL, C. GREG
STREET ADDRESS	300 DELANNOY AVENUE
CITY-ST-ZIP	COCOA, FL 32922

Please note Vice President of Corporation as well.

Thank You,

A handwritten signature in cursive script, reading "Donna Dempsey". The signature is fluid and elegant, with a long, sweeping underline.

Donna Dempsey  
Corp. Secretary, The S.F. Travis Co., Inc.