

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 162804

Entity Name: ANTHONY'S, INC.

FILED
Apr 04, 2006
Secretary of State

Current Principal Place of Business:

P.O. BOX 18769
W PALM BCH., FL 33416

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 18769
W PALM BCH., FL 33416

New Mailing Address:

FEI Number: 59-0626081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANTHONY, M. POPE
5000 GEORGIA AVE
W PALM BCH., FL 33405 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: PD () Delete
Name: ANTHONY, M. POPE,
Address: 5000 GEDRGIA AVE
City-St-Zip: W PALM BCH., FL

Title: VD () Delete
Name: MORGAN, GARY W.,
Address: 7515 NEMEX DR N
City-St-Zip: W PALM BCH., FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANTHONY, M. POPE,
Address: 5000 GEDRGIA AVE
City-St-Zip: W PALM BCH., FL 33405

Title: VD (X) Change () Addition
Name: MORGAN, GARY W.,
Address: 7515 NEMEC DR N
City-St-Zip: W PALM BCH., FL 33406

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: GARY W MORGAN

VD

04/04/2006

Electronic Signature of Signing Officer or Director

Date