


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 20, 2006 8:00 am**  
**Secretary of State**

02-20-2006 90057 036 \*\*\*150.00

<b>DOCUMENT # 243339</b>	
1. Entity Name FLETCHER PRINTING CO.	

Principal Place of Business 4250 S. FLORIDA AVE SUITE #1 LAKELAND, FL 33813 US	Mailing Address 4250 S. FLORIDA AVE SUITE #1 LAKELAND, FL 33813 US
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  FLETCHER, RALPH L 4250 S. FLORIDA AVE LAKELAND, FL 33813	<b>DO NOT WRITE IN THIS SPACE</b>
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FLETCHER, RALPH L 4250 S. FLORIDA AVE LAKELAND, FL 33813
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLETCHER, MARGURITE 4250 S. FLORIDA AVE LAKELAND, FL 33813
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IN THIS SPACE**

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: <u>Ralph L Fletcher</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date: <u>02-03-06</u>	Daytime Phone #: <u>863-644-2515</u>
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