2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2006
Secretary of State

DOCUMENT# 279607

Entity Name: KOONTZ COMPANY

Current Principal Place of Business:

3111 S PINE AVE
OCALA, FL 34471 US

New Principal Place of Business:

Current Mailing Address:

3111 S PINE AVE
OCALA, FL 34471

New Mailing Address:

FEI Number: 59-1036601 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOONTZ, MICHAEL P.
3111 S. PINE AVE
OCALA, FL 32670 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: C ( ) Delete
Name: KOONTZ, MICHAEL P.,
Address: 3111 S. PINE AVE.
City-St-Zip: OCALA, FL 34471

Title: P ( ) Delete
Name: KOONTZ, DIANE T.,
Address: 3111 S PINE AV.
City-St-Zip: OCALA, FL 34471

Title: ST ( ) Delete
Name: ADKISON, MARY ALICE,
Address: 3111 S PINE AV
City-St-Zip: OCALA FL,

Title: V ( ) Delete
Name: KOONTZ, KATHERINE L
Address: 3446 SW 19TH STREET
City-St-Zip: OCALA, FL 34479

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MARY ALICE ADKISON ST 01/24/2006

Electronic Signature of Signing Officer or Director Date