## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 345183** 

Entity Name: ROBERT J. FEWELL COMPANY

FILED Apr 26, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

288 ARAGON AVENUE, STE. C. 288 ARAGON AVENUE CORAL GABLES, FL 33134

SUITE C

CORAL GABLES, FL 33134

**Current Mailing Address:** New Mailing Address:

288 ARAGON AVENUE, STE. C. 288 ARAGON AVENUE CORAL GABLES, FL 33134

SUITE C

CORAL GABLES, FL 33134

FEI Number: 59-1265246 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

FEWELL, CAROLE FEWELL, CAROLE 288 ARAGON AVENUE, STE. C. 288 ARAGON AVENUE

CORAL GABLES, FL 33134 SUITE C

CORAL GABLES, FL 33134 US

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: CAROLE FEWELL 04/26/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

FEWELL, ROBERT, FEWELL, ROBERT, Name: Name: 930 S GREENWAY DR 930 S GREENWAY DR Address: Address: City-St-Zip: CORAL GABLES, FL City-St-Zip: CORAL GABLES, FL 33134

DST Title: DST (X) Change ( ) Addition Title: () Delete Name: FEWELL.MARIAN. Name: FEWELL.MARIAN. 930 S GREENWAY DR 930 S GREENWAY DR Address: Address: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL City-St-Zip:

Title: (X) Change ( ) Addition Title: PD ( ) Delete PD

FEWELL, CAROLE, FEWELL, CAROLE, Name: Name: 4801 CAMPO SANO COURT 11883 MAIDSTONE DRIVE Address: Address: City-St-Zip: CORAL GABLES, FL 331461160 City-St-Zip: WEST PALM BEACH, FL 33414

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: CAROLE FEWELL PD 04/26/2006