

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 396647

FILED
Jan 30, 2006
Secretary of State

Entity Name: SPS COMMERCIAL CENTER, INC.

Current Principal Place of Business:

ROUTE 707, RIO
P.O. BOX 67
STUART, FL 349950067

New Principal Place of Business:

Current Mailing Address:

ROUTE 707, RIO
P.O. BOX 67
STUART, FL 349950067

New Mailing Address:

P.O. BOX 67
STUART, FL 349950067

FEI Number: 59-1462365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TIMON, L.J.
657 NE DIXIE HIGHWAY
JENSEN BEACH, FL 34957 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: TIMON, L. J.,
Address: 657 NE DIXIE HIGHWAY
City-St-Zip: JENSEN BEACH, FL

Title: VPSD () Delete
Name: TIMON, GAY,
Address: 657 NE DIXIE HIGHWAY
City-St-Zip: JENSEN BEACH, FL

Title: VD () Delete
Name: SLATER, GROSE,
Address: MANOR DRIVE
City-St-Zip: STUART, FL

Title: VD () Delete
Name: JOHNSTON, NANCY
Address: SUMNER AVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VSD (X) Change () Addition
Name: TIMON, GAY,
Address: 657 NE DIXIE HIGHWAY
City-St-Zip: JENSEN BEACH, FL

Title: VD (X) Change () Addition
Name: SLATER, GROSE,
Address: 511 MANOR DRIVE
City-St-Zip: STUART, FL

Title: VD (X) Change () Addition
Name: JOHNSTON, NANCY
Address: 1005 SUMNER AVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: D () Change (X) Addition
Name: CHERI, PAWLAK M
Address: 1005 SUMNER AVE
City-St-Zip: JENSEN BEACH, FL 34957

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: LAWRENCE J TIMON

PD

01/30/2006

Electronic Signature of Signing Officer or Director

_____ Date