


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2006 8:00 am
Secretary of State

03-02-2006 90009 033 ***158.75

DOCUMENT # 416713 1. Entity Name MANCHESTER INVESTMENTS, INC.			
Principal Place of Business 3033 RIVIERA DR STE 201 NAPLES, FL 34103 US		Mailing Address 3033 RIVIERA DR STE 201 NAPLES, FL 34103 US	
2. Principal Place of Business c/o David G. Budd		3. Mailing Address c/o David G. Budd	
Suite, Apt. #, etc. 3033 Riviera Drive, #201		Suite, Apt. #, etc. 3033 Riviera Drive, #201	
City & State Naples, Florida		City & State Naples, Florida	
Zip 34103	Country USA	Zip 34103	Country USA
4. FEI Number 59-1489161		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BUDD, DAVID G. 3033 RIVIERA DR STE 201 NAPLES, FL 34103		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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. (NOTE: Registered Agent signature required when reappointing)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BUDD, DAVID G 3033 RIVIERA DR., STE. 201 NAPLES, FL 34103	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD RUBIN, HARRY 3033 RIVIERA DR., STE. 201 NAPLES, FL 34103	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RUBIN, BENJAMIN 3033 RIVIERA DR., STE. 201 NAPLES, FL 34103	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS RUBIN, LINDA 3033 RIVIERA DR., STE. 201 NAPLES, FL 34103	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <i>David G. Budd</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		2/28/06 (239) 263-7700 <small>Date Daytime Phone #</small>	
DAVID G. BUDD, VICE PRESIDENT			