

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 437726

Entity Name: E & E ASSOCIATES, INC.

FILED  
Mar 09, 2006  
Secretary of State

## Current Principal Place of Business:

9419 S.W. 67TH DRIVE  
GAINESVILLE, FL 32608

## New Principal Place of Business:

## Current Mailing Address:

9419 S.W. 67TH DRIVE  
GAINESVILLE, FL 32608

## New Mailing Address:

FEI Number: 59-1508661

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PERRY, EVELYN  
9419 SW 67 DR  
GAINESVILLE, FL 32608 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: PERRY, EVELYN,  
Address: 9419 S.W. 67TH DR.  
City-St-Zip: GAINESVILLE, FL

Title: VD ( ) Delete  
Name: PERRY, DONALD  
Address: 9419 SW 67 DR.  
City-St-Zip: GAINESVILLE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: EVELYN PERRY

PD

03/09/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date