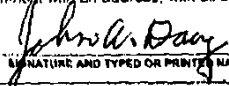


FILED
Mar 23, 2006 8:00 am
Secretary of State

03-23-2006 90013 033 ***150.00

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 454758		
1. Entity Name JOHN A. DACY & ASSOCIATES, INC.		
Principal Place of Business 177 OCEAN LANE DR 708 KEY BISCAVNE, FL 33149-1540 US		Mailing Address 177 OCEAN LANE DR 708 KEY BISCAVNE, FL 33149-1540 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent DACY, JOHN A 177 OCEAN LANE DR. APT 708 KEY BISCAVNE, FL 33149		DO NOT WRITE IN THIS SPACE
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOT: Registered Agent signature required when reappointing)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DACY, JOHN A. 280 CRANDON BLVD SUITE 32-115 KEY BISCAVNE, FL 33149	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDRESS CORRECTION PMB 115 260 CRANDON BLVD, SUITE 32 KEY BISCAVNE, FL 33149	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 appointed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: 		MAR 20 2006 305-449-4555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		