

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 501158

FILED
Apr 25, 2006
Secretary of State

Entity Name: ROBINSON FANS FLORIDA, INC.

Current Principal Place of Business:

3955 DRANE FIELD RD
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

3955 DRANE FIELD RD.
P.O.BOX 6260
LAKELAND, FL 33807 US

New Mailing Address:

FEI Number: 59-1720058 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERINGER, PETER M
3955 DRANEFIELD RD
LAKELAND, FL 33803 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: C () Delete
Name: GUTZWILLER, H LESLIE
Address: ROBINSON DR
City-St-Zip: ZELIENOPLE, PA

Title: P () Delete
Name: BERINGER, PETER
Address: 3955 DRANE FIELD RD
City-St-Zip: LAKELAND, FL 33811

Title: T () Delete
Name: MARBURGER, V RONALD
Address: ROBINSON DR
City-St-Zip: ZELIENOPLE, PA

Title: S () Delete
Name: AL, LOPEZ R JR
Address: 4600 W CYPRESS ST STE 500
City-St-Zip: TAMPA, FL 33607

Title: EXEV () Delete
Name: CARL, STAIBLE
Address: ROBINSON DR
City-St-Zip: ZELIENOPLE, PA

Title: VS () Delete
Name: HENDERSON, JAY W
Address: ROBINSON DR
City-St-Zip: ZELIENOPLE, PA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: PETER M BERINGER

P

04/25/2006

Electronic Signature of Signing Officer or Director

Date