FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Jun 05, 2006 8:00 am Secretary of State 06-05-2006 90146 050 ***550.00

DOCUMENT # 556170

SIGNATURE:

COLE, BRUMLEY & EICHNER, INC.



| DO NOT WRITE IN THIS SPACE | | | | | | | | |
|--|---|----------------------------|-----------------------------------|------------------------|--|---------------------------------|--------------------------------|--|
| 2. Principal Place of Business STATE HIGHWAY 426 STATE HIGHWAY 426 | | | | | _ | 50020551 | | |
| Suite, Apt. #, etc. P. 0. Bux 205 Suite, Apt. #, etc. P. 0. Bux 20 | | | | | CR2E034B (8/05) | | | |
| City R. State | | City & State | City & State | | 4. FEI Number 50 | 1-1790834 | Applied For Not Applicable | |
| Zip 31732 Country Z | | ² 32732 | 32732 Country | | 5. Certificate of Status Desired See Required Fee Required | | | |
| | DO NOT WE | RITE | | Name Street Address | L. JOHN E | of Current Registered A | gent | |
| IN THIS SPACE | | | | Ottaat voorasi | s (F.O. Box Number) S. A. T. F. 1110 | HWAY 426 | | |
| | | | ' | City | GENEVA | FL | 32332 | |
| | named entity submits this statement for t ions of registered agent. | he purpose of changing its | registered | d office or regisi | tered agent, or both, in the | e State of Florida. I am fam | iliar with, and accept | |
| SIGNATURE _ | Signature, typed or printed name of registered agent and | d title if applicable (NOT | E Registered | Agent signature requi | red when reinstating) | DATE | | |
| January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended AR is \$61.25 | | | | | | ampaign Financing Contribution. | \$5.00 May Be Added to Fees | |
| Make Check | Payable to Florida Department of S OFFICERS AND DI | | <u> </u> | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PT EICHNER, L. NOHN 131 CYPRESS PT. ST. SIMONS ISLAND, L | le | TITLE NAME STREET CITY-S | T ADDRESS | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VS EICHNER, LAMBERT 963 BOULDER LAM | • | TITLE NAME STREET CITY-S | T ADDRESS | | | | |
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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other ke empowered.

ATTACHMENT COLEBRUMLEY&EICHNER, $_{INC}$. P. O. BOX 205 - GENEVA, FLORIDA 32732 - 305 349 5351 June 3, 2006 Division of Cognations P.O. Box 1500 Tallahasser, Fla 32302-1500 Gentlemen: Enclosed is our Annual Report (AR) for 2006. It was due on May 1, 2006. The reason it was not filed before May 1, as we have filed in previous years, is that we did not receive a copy of the Annual Report to file prior to May 1,2006. We do not know why it was not received - whether it was the fault of the Post of fice or of the mailing room or some mechanical or computer error. We are a Small, 20 acre citres grove, in Seminale County. Our crops and many of our trees were distroyed by Hauricanes Charley and Frances, both of which parsed hiestly over our grove in 2004. We had to sell one form groves as a result. We cannot afford to pay a 400 penalty for failure to receive a piece of mail with a routine notice of a tax that is due. Fortunately, in reviewing our accounts paid in April, 1 niticed that the Coppation for had not feen paid as it had in lost april. I called the Division of Corporations + left word with the recorded wrice and you mailed the form dated May 23rd, which I received yesterday.

We are asking for hardship consideration and a refund.

Thank you, I who silves