2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2006 08:00 AM Secretary of State

AINIOAETEE								
DOCUMENT # 1. Entity Name BODREE PRINTING								
Principal Place of Business 4205 LILLIAN HWY PENSACOLA, FL 32506	US	Mailing Address P.O. BOX 3005 P. O. BOX 3005 PENSACOLA, FL 32516-3005	ยร					



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05)

4. FEI Number 59-1860387

04262006

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Regulred

5. Name and Address of Current Registered Agent

BODREE, GAY 4205 LILLIAN HWY P.O. BOX 3005 PENSACOLA, FL 32506

DO NOT WRITE IN THIS SPACE

PENSACOLA, FL 32500					
	named entity submits this statement for the plans of registered agent.	urpose of changing its registered	office of r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or primed name of registered again and the li	applicable (NOTE Registered)	geni signaturi	nequired when reinstating)	DATE
		Election Campaign Finance Trust Fund Contribution,	ing 🗆	\$5.00 May Be Added to Fees	05/16/06-80049-004 150.00
10.	OFFICERS AND DIREC	TORS			<u></u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BODREE, GAY N. 4205 LILLIAN HWY. PENSACOLA, FL			•	en e
TITLE NAME STREET ADDRESS CITY-SI-DP				·	•
Tille Name Sirlei address City-St-Zip			DO NOT WRITE		
TITLE NAME STREET ADDRESS CSTY-ST-ZIP				in '	THIS SPACE
TITLE NAME STREET ADDRESS GTY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby	certify that the information supplied with this fi	ling does not qualify for the exer	nptions co	ntained in Chapter 11	9, Florida Statutes. I further certify that the information

12. Thereby certify that the information supplied with his filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further centry that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as it made under eath, 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:

BOY BOLL BIGNATURE AND TYPED OR PRINTED NAME Gay Bodree

4-20-06

850-455-8511

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