


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2006 8:00 am
Secretary of State

02-21-2006 90025 022 ***150.00

DOCUMENT # 598445		
1. Entity Name I 75 / S 80 CORP.		

Principal Place of Business % GEORGE & ALEXANDER 2831 RINGLING BLVD STE 112C SARASOTA, FL 34237 US	Mailing Address % GEORGE & ALEXANDER 2831 RINGLING BLVD STE 112C SARASOTA, FL 34237 US
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40015755



2. Principal Place of Business <i>c/o L.H. Alexander, CPA</i>	3. Mailing Address <i>c/o L.H. Alexander, CPA</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

01252006 Chg-P CR2E034 (11/05)

City & State	City & State
Zip	Country

4. FEI Number 59-1875950	Applied For Not Applicable
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Zip	Country	Zip	Country
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent RITCHEY, JAMES 1550 RINGLING BLVD. SARASOTA, FL 33577	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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. (NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	VT <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE, JOSEPH W.	NAME	
STREET ADDRESS	74 COLBY RD	STREET ADDRESS	
CITY-ST-ZIP	MOULTONBORO, NH 03254	CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LYNN, JAMES H	NAME	
STREET ADDRESS	58 HANCOCK ROAD	STREET ADDRESS	
CITY-ST-ZIP	NEEDHAM, MA 02492	CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LYNN, MEREDITH M	NAME	
STREET ADDRESS	58 HANCOCK RD.	STREET ADDRESS	
CITY-ST-ZIP	NEEDHAM, MA	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>I-75/S-80 CORP</i>	<i>Meredith M. Lynn</i>	2/18/06	781-449-1036
BY: <i>Meredith M. Lynn</i>		Sec'y	