

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 603421

FILED
Jan 05, 2006
Secretary of State

Entity Name: SHELL, FLEMING, DAVIS & MENGE, P.A.

Current Principal Place of Business:

226 PALAFOX PL 9TH FLOOR
P.O. BOX 1831
PENSACOLA, FL 32502 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1831
P.O. BOX 1831
PENSACOLA, FL 325981831 US

New Mailing Address:

FEI Number: 59-1409547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERT C. PALMER, III
226 S PALAFOX ST
9TH FLOOR
PENSACOLA, FL 32501 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: PD () Delete
Name: PALMER, ROBERT C III
Address: 226 S PALAFOX ST
City-St-Zip: PENSACOLA, FL

Title: VD () Delete
Name: SHELL, THURSTON A
Address: 226 S PALAFOX ST
City-St-Zip: PENSACOLA, FL

Title: VD () Delete
Name: KEPNER, DANNY L
Address: 226 S PALAFOX ST
City-St-Zip: PENSACOLA, FL

Title: VD () Delete
Name: FLEMING, FLETCHER
Address: 226 S PALAFOX ST
City-St-Zip: PENSACOLA, FL

Title: VD () Delete
Name: HOFFMAN, CHARLES JR
Address: 226 S PALAFOX ST
City-St-Zip: PENSACOLA, FL

Title: VD () Delete
Name: TRAWICK, JOHN B
Address: 226 PALAFOX PLACE
City-St-Zip: PENSACOLA, FL 32501

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
Name:
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: ROBERT C. PALMER, III

PD

01/05/2006

Electronic Signature of Signing Officer or Director

Date