

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 603546

1. Entity Name

CARPENTER & BROWN, P.A.



Principal Place of Business

701 E COMMERCIAL BLVD STE 100
FT. LAUDERDALE FL 33334

Mailing Address

701 E COMMERCIAL BLVD STE 100
FT. LAUDERDALE FL 33334

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1398114

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARPENTER, DANIEL T.
701 E COMMERCIAL BLVD STE 100
FORT LAUDERDALE FL 33334

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 resigning)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDAS ☐ Delete
NAME CARPENTER, DANIEL T.
STREET ADDRESS 6110 N WOODRIDGE DR.
CITY- ST- ZIP PARKLAND FL

TITLE ☐ Change ☐ Add
NAME ☐ Change ☐ Add
STREET ADDRESS 000000419316
CITY- ST- ZIP 02/15/06-80002-011 150.00

TITLE STDV ☐ Delete
NAME BROWN, ROGER
STREET ADDRESS 1950 NE 56 COURT
CITY- ST- ZIP FT LAUDERDALE, FL 00000

TITLE ☐ Change ☐ Add
NAME ☐ Change ☐ Add
STREET ADDRESS ☐ Change ☐ Add
CITY- ST- ZIP ☐ Change ☐ Add

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CITY- ST- ZIP ☐ Change ☐ Add

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 an officer like empowered.

SIGNATURE

Daniel T. Carpenter

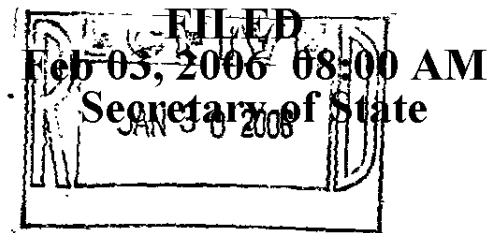
1/30/06

954-771-1850

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



1st MOORE CR2E034 (10/05)