



2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

05-01-2006 90306 032 ***150.00

DOCUMENT # 609900 1. Entity Name 4201 MANAGEMENT GROUP, INC.					
Principal Place of Business 2911 OCEAN DR. VERO BEACH, FL 32963			Mailing Address 2911 OCEAN DR. VERO BEACH, FL 32963		
2. Principal Place of Business 2345 14TH AV. Suite, Apt., etc. SUITE 5 City & State VERO BEACH FL Zip 32960 Country USA		3. Mailing Address 2345 14TH AV. Suite, Apt., etc. SUITE 5 City & State VERO BEACH FL Zip 32960 Country USA			
01042006 Chg-P CR2E034 (11/05)				4. FEI Number 59-1900741	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SPYTEK THERESA H 4201 6TH LANE SW VERO BEACH, FL 32968			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: <u>Theresa Spytek</u> 1/6/2006 <small>Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent Signature required when resigning) DATE</small>					
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			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P 4201 MGMT. GROUP, INC. 4201 6TH LANE SW VERO BEACH, FL 32968		<input checked="" type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT THERESA SPYTEK 4201 6TH LN SW VERO BEACH FL 32968		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Delete		
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: <u>Theresa Spytek</u> 6/27/06 772-569-6085 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR Date Daytime Phone #</small>					

THERESA SPYTEK