2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 06, 2006 08:00 AM Secretary of State

DOCU! 1. Entity Nam VEIT & V					Secre	tary of State
Principal Plac 712 BEAR CI WINTER SPR		Mailing Address 712 BEAR CREEK CIRCLE WINTER SPRINGS, FL 32708		2 10 10 10 10 10 10 10 10 10 10 10 10 10	FO 1912 (1822) 1882) 2991 (1821)	1127 - 272 1 (2727 - 2727 - 2727)
C	O NOT WRITE 8. Name and Address of Current Re		CE	01232006 4. FEI Numb 59-192	Na Chg-P	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
VEIT, E THEODORE 712 BEAR CREEK CIRCLE WINTER SPRINGS, FL 32708			DO NOT WRITE IN THIS SPACE			
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 approache. (NOTE Registered Agent signature required when remistating). DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.						
TO. ITTLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DI PV VEIT, E. THEODORE 712 BEAR CREEK CIRCLE WINTER SPRINGS, FL ST VEIT, MARCIA R. 712 BEAR CREEK CIRCLE WINTER SPRINGS, FL	RECTORS			U00000 02/16/06-	421825 80020-820 150.00
TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE		,			NOT W	
NAME STREET ADDRESS CHY-ST-209				IN	THIS SP	ACE
TITLE NAME STREET ADDRESS CITY-SI-ZIP						
TIFLE NAME STREET ADDRESS CHY-ST-LIP						
12. I hereby certify that the information supplied with this filling 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 eath; that I am an officer or director of the corporation or the receiver or trusted 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: SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR 1 Date Daylore Phone F						