

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 639194

FILED
Apr 24, 2006
Secretary of State

Entity Name: MONTAGUE & ASSOCIATES, INC.

Current Principal Place of Business:

521 NE 1ST STREET
SUITE B
GAINESVILLE, FL 326015393 US

New Principal Place of Business:

Current Mailing Address:

521 NE 1ST STREET
SUITE B
GAINESVILLE, FL 326015393 US

New Mailing Address:

P O BOX 141448
GAINESVILLE, FL 326141448 US

FEI Number: 59-1943915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTAGUE, JAMES B
521 NE 1ST ST
SUITE B
GAINESVILLE FL, FL US

Name and Address of New Registered Agent:

TRIGG, KATHERINE M
521 NE 1ST ST
SUITE B
GAINESVILLE, FL 32601 US

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: KATHERINE M. TRIGG

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MONTAGUE, JAMES B,
Address: 521 NE 1ST STREET SUITE B
City-St-Zip: GAINESVILLE FL,

Title: VD () Delete
Name: MONTAGUE, KATE E,
Address: 521 NE 1ST STREET SUITE B
City-St-Zip: GAINESVILLE FL,

Title: STD () Delete
Name: TRIGG, KATHERINE MON, TAGU
Address: 521 NE 1ST STREET SUITE B
City-St-Zip: GAINESVILLE FL,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MONTAGUE, JAMES B
Address: 521 NE 1ST STREET SUITE B
City-St-Zip: GAINESVILLE, FL 32601 US

Title: VD (X) Change () Addition
Name: MONTAGUE, KATE E
Address: 521 NE 1ST STREET SUITE B
City-St-Zip: GAINESVILLE, FL 32601 US

Title: ST (X) Change () Addition
Name: TRIGG, KATHERINE M
Address: 521 NE 1ST STREET SUITE B
City-St-Zip: GAINESVILLE, FL 32601

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: KATHERINE MONTAGUE TRIGG

ST

04/24/2006

Electronic Signature of Signing Officer or Director

Date