## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Jan 11, 2006 08:00 AM Secretary of State **DOCUMENT #656279** EUGÉNE J. CARR, D.P.M., P.A. Principal Place of Business Mailing Address 275 EIGHTH STREET SOUTH 275 EIGHTH STREET SOUTH NAPLES, FL 34102 NAPLES, FL 34102 01062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1981123 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARR, EUGENE J JR DO NOT WRITE 275 EIGHTH STREET SOUTH NAPLES, FL 34102 IN THIS SPACE 3. 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. U00000382210 01/11/06-80087-012 150.00 SIGNATURE. Signature, Typed or printed name of registered agent and title if applicable (NOTE Pessistered Agent signature required when reinstalling) CATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. PSTD TITLE CARR, JR., EUGENE J MAME 275 EIGHTH ST S STREET ADDRESS CHY-ST-ZIP NAPLES, FL 34102 LUTHRINGER, PETER J NAME STREET ADDRESS 275 EIGHTH ST S COTY-ST-ZIP NAPLES, FL 34102 TITLE NAME STREET ADDRESS DO NOT WRITE CDIY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. Thereby 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 withyan address, with all other like empowered.

SIGNATURE: (Lyan

STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

AND TYPED OR PRINTED NAME OF SIG

FILED