2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006
Secretary of State

DOCUMENT# F01292

Entity Name: DAVID F. CUTHBERTSON, INC.

Current Principal Place of Business:

516 NW 22ND STREET
WILTON MANORS, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

516 NW 22ND STREET
WILTON MANORS, FL 33311 US

New Mailing Address:

FEI Number: 59-2041136 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GIBSON, WILLIAM MCK. JR
1121 E BROWARD BLVD.
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

KRBLICH, CHARLES
1121 E BROWARD BLVD.
FORT LAUDERDALE, FL 33301 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: CHARLES KRBLICH 04/06/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTS ( ) Delete
Name: CUTHBERTSON, DAVID F,
Address: 516 NW 22ND ST
City-St-Zip: WILTON MANORS, FL 33311

Title: VP ( ) Delete
Name: JOSHUA S. CUTHBERTSO, N
Address: 7186 MAIDA LANE -APT. 76
City-St-Zip: FT MYERS, FL 33909

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SEC ( ) Change (X) Addition
Name: GAIL CUTHBERTSON,
Address: 516 NW 22 STREET
City-St-Zip: WILTON MANORS, FL 33311 US

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: DAVID F. CUTHBERTSON PTS 04/06/2006
Electronic Signature of Signing Officer or Director Date