

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002772

Entity Name: GOVDEALS, INC.

FILED
May 24, 2006
Secretary of State

Current Principal Place of Business:

5913 CARMICHAEL PLACE
MONTGOMERY, AL 36117

New Principal Place of Business:

Current Mailing Address:

5913 CARMICHAEL PLACE
MONTGOMERY, AL 36117

New Mailing Address:

FEI Number: 63-1241096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATERS, GEORGE H
1805 FARM TRAIL
SANIBEL, FL 33957 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: UNDERWOOD, MICHAEL K
Address: 519 SEMINOLE DRIVE
City-St-Zip: MONTGOMERY, AL 36117

Title: PRES () Delete
Name: DEBARDELABEN, ROBERT L
Address: 1127 DURDEN ROAD
City-St-Zip: PRATTVILLE, AL 36067

Title: DIR () Delete
Name: WILKINSON, CHARLES
Address: 5913 CARMICHAEL PLACE
City-St-Zip: MONTGOMERY, AL 36117

Title: DIR () Delete
Name: SIMONTON, FORREST
Address: 5913 CARMICHAEL PLACE
City-St-Zip: MONTGOMERY, AL 36117

Title: SEC () Delete
Name: CROW, MICHAEL D
Address: 1823 LLANFAIR ROAD
City-St-Zip: MONTGOMERY, AL 36106

Title: DIR () Delete
Name: GRAVLEY, ROGER D
Address: 5913 CARMICHAEL PLACE
City-St-Zip: MONTGOMERY, AL 36117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

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

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: ROBERT L DEBARDELABEN

PRES

05/24/2006

Electronic Signature of Signing Officer or Director

Date