

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 28, 2006 08:00 AM
Secretary of State

DOCUMENT # F04000004785

1. Entity Name
NARRAGANSETT BAY SECURITIES INCORPORATED



Principal Place of Business
**15350 SW 248 STREET
HOMESTEAD, FL 33032**

Mailing Address
**28 PELHAM STREET
NEWPORT, RI 02840**



07072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
05-0505355

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CRAIG, GUY
15350 SW 248 STREET
HOMESTEAD, FL 33032**

**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 (if typed or printed, the signature must be accompanied by a signature of the registered agent or the registered agent's authorized representative)

DATE

**FILE NOW!!!
Due by Sept. 6, 2006**

Trust Fee

☐ Added to Fees

\$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	CPS
NAME	CRAIG, GUY D.
STREET ADDRESS	15350 SW 248 STREET
CITY-ST-ZIP	HOMESTEAD, FL 33032
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**U00000572719
07/28/06-80010-018 150.00**

**DO NOT WRITE
IN THIS SPACE**

12. I hereby 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 registered 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 with an affidavit, with all other true empowered.

SIGNATURE:

Guy D. Craig

GUY D. CRAIG

7/24/06

305-248-0119

Signature typed or printed (if typed or printed, the signature must be accompanied by a signature of the registered agent or the registered agent's authorized representative)

Date

Daytime Phone #