

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-19-2006 90108 022 ***158.75

DOCUMENT # F29494

1. Entity Name
IBG PROPERTIES, INC.



Principal Place of Business

P.O. BOX 459
ATT: KATHY MCDANIEL
LABELLE, FL 33935

Mailing Address

PO BOX 725
ATT: KATHY MCDANIEL
WINDERMERE, FL 34786-0725 US

50013779



2. Principal Place of Business
2520 Sand Mine Road

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03312006 Chg-P CR2E034 (11/05)

City & State

Davenport, FL

City & State

4. FEI Number
59-2086555

Applied For
Not Applicable

Zip
33897

Country
USA

Zip

Country

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

6. Name and Address of Current Registered Agent

FLOYD, THOMAS C
2520 SAND MINE ROAD
DAVENPORT, FL 33897

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 name of registered agent and title if applicable.

Thomas C. Floyd, Agent

(NOTE: Registered Agent signature required when reinstating)

DATE

4-3-06

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
MCDANIEL, KATHY
PO BOX 725
WINDERMERE, FL 347860725 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
BERRY, JACK M JR
PO BOX 725
WINDERMERE, FL 347860725 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
CALDWELL, ERNIE
2520 SAND MINE ROAD
DAVENPORT, FL 33897 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
DEVERS, DANIEL J
2520 SAND MINE ROAD
DAVENPORT, FL 33897 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
MORRIS, KATHARINE B
2520 SAND MINE ROAD
DAVENPORT, FL 33897 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

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 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 with an address, with all other like empowered.

SIGNATURE:

[Signature]

Daniel J. Devers, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/06

Date

(863)420-6699

Daytime Phone #