2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F49051

1. Entity Name SPECTRUM SYSTEMS, INC.



FILED Jan 23, 2006 08:00 AN Secretary of State

Principal Place of Business

3410 W. NINE MILE ROAD %H. GORDON JONES, JR. PENSACOLA, FL 32526-4808 Mailing Address

3410 W. NINE MILE ROAD %H. GORDON JONES, JR. PENSACOLA, FL 32526-4808



DO NOT WRITE IN THIS SPACE

01132000.	NO Chg-r	CH2E034 (11/03)			
4. FEI Number			Applied		
59-2139	386		Not App		

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JONES, H. GORDON, JR. 4210 LYDA NORA DRIVE PENSACOLA, FL 32533

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plions of registered agent.	urpose of changing its registered	office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with,
SIGNATURE.	Signature, typed or printed name of registered again; and title t	applicable. (NÖTĒ: Registered Ag	ent signature	e required when reinstating)	· DÀTE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financir Trust Fund Contribution.	g 🗖	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JONES H GORDON JR 4210 LYNN ORA PENSACOLA, FL 32504	·	U00000395876 01/27/06-80010-006 150.00		
TITLE NAME STREET ADDRESS GIFY-ST-ZIP	VGM DAVIS, REGINALD A 3336 VILLAGE GREEN DR PACE, FL 32571	,			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BENTON, JANET M 3918 WILEY PENTON RD PACE, FL 32571			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					· ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filling 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 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 Blochanged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sant M Boutan