2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

D OR PRINTED NAME OF

NING OFFICER OR DIRECTOR

Apr 20, 2006 08:00 AN DOCUMENT # F60103 **Secretary of State** 1. Entity Name SENTCO, INC. Mailing Address Principal Place of Business P.O. BOX 579 1121 STERLING ROAD INVERNESS, FL 34453 INGLIS, FL 34449 US 04182006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 43-1248562 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARLSON, BRIAN A DO NOT WRITE 1121 STERLING RD. IVERNESS, FL 34453 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 name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstaling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE PVD POOLE, DANIEL CURTIS 20 CAPTAINS COVE RD. STREET ADDRESS CITY-ST-ZIP INGLIS, FL 34449 U00000520901 05/02/06-80111-018 158.75 STD TITLE GRIENER, AMANDA K STREET ADDRESS 382 TRAVINO AVE CITY-ST-ZIP SAINT AUGUSTINE, FL 32086 TITLE POOLE, JAMES NAME STREET ADDRESS N105W14667 LINCOLN DRIVE DO NOT WRITE GERMANTOWN, WI 53022 CITY-ST-ZIP IN THIS SPACE MLE MAINE STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 eath; 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.

FILED