


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2006 8:00 am
Secretary of State

01-26-2006 90034 050 ***150.00

DOCUMENT # F69784	
1. Entity Name SPARTAN ENTERPRISES, INC.	

Principal Place of Business % STEPHEN MCNAMARA 32646 US 19 NORTH PALM HARBOR, FL 34684	Mailing Address % STEPHEN MCNAMARA 32646 US 19 NORTH PALM HARBOR, FL 34684
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DO NOT WRITE IN THIS SPACE	
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01042006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2163446	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MCNAMARA, STEPHEN 32646 US 19 N PALM HARBOR, FL 33505 34684	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCNAMARA, STEPHEN 2194 PINNACLE CIR. PALM HARBOR, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCNAMARA, NANCY G. 2194 PINNACLE CIR. PALM HARBOR, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: *Stephen McNamara* **1/4/06** **727/784-4050**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #