

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002652

FILED
Jan 20, 2006
Secretary of State

Entity Name: BONNEY, LARAMORE AND HOPKINS INC.

Current Principal Place of Business:

443 22ND PLACE SE
VERO BEACH, FL 32962

New Principal Place of Business:

Current Mailing Address:

443 22ND PLACE SE
VERO BEACH, FL 32962

New Mailing Address:

FEI Number: 43-1000041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARAMORE, CHARLES R
443 22ND PLACE SE
VERO BEACH, FL 32962 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CDP () Delete
Name: LARAMORE, CHARLES R
Address: 443 22ND PLACE SE
City-St-Zip: VERO BEACH, FL 32962

Title: DST () Delete
Name: LARAMORE, SUSAN
Address: 1126 32ND AVE.
City-St-Zip: VERO BEACH, FL 32962

Title: DV () Delete
Name: LARAMORE, PAMELA M
Address: 65 MURFIELD SPRINGS COURT
City-St-Zip: ST CHARLES, MO 63304

Title: V () Delete
Name: ALLEN, SUSAN
Address: 1126 32ND AVE. S.W.
City-St-Zip: VERO BEACH, FL 32968

Title: V () Delete
Name: LARAMORE, MARK
Address: 3907 WEST MAIN
City-St-Zip: BELLEVILLE, IL 62226

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DST (X) Change () Addition
Name: LARAMORE, SUSAN E
Address: 1126 32ND AVE.
City-St-Zip: VERO BEACH, FL 32962

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES R LARAMORE

CDP

01/20/2006

Electronic Signature of Signing Officer or Director

Date