## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G25638

FILED Feb 07, 2006 Secretary of State

Entity Name: PORT ST. LUCIE ENTERPRISES, INC.

urrent P	rincipal Place o	T DUSINESS:	New Principal Place	or business:
621 VLOS CHARLOT	SI DR TE, NC 28226	US		
Current Mailing Address:		New Mailing Address:		
621 VLO: CHARLOT	SI DR. TE, NC 28226	US		
El Number	: 59-2471835	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	l Address of Cu	rrent Registered Agent:	Name and Address of	of New Registered Agent:
761 HOLIÉ	CARLTON DAY DR.			
PUNTA G	ORDA, FL 3395	) US		
「he above			ourpose of changing its registere	d office or registered agent, or both,
「he above	named entity su e of Florida.		ourpose of changing its registere	d office or registered agent, or both,
he above the State	named entity su e of Florida. RE:			d office or registered agent, or both,  Date
The above on the State SIGNATUI	named entity su e of Florida. RE: Electronic	bmits this statement for the բ		
The above in the State BIGNATUI	named entity su e of Florida. RE: Electronic	bmits this statement for the particles of Registered Agricust Fund Contribution ( ).	ent	
The above in the State BIGNATUI	e named entity su e of Florida. RE: Electronic mpaign Financing 1	bmits this statement for the particle signature of Registered Agricust Fund Contribution ( ).  DRS: elete	ent	Date
The above in the State SIGNATUI	e named entity sue of Florida.  RE: Electronic mpaign Financing 1  S AND DIRECTO P () D KURTZ, MARY A 6621 VLOSI DR CHARLOTTE, NC	Signature of Registered Agricust Fund Contribution ( ).  DRS: elete 28226 elete EK DR	ent  ADDITIONS/CHANGI  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: MARY A. KURTZ P 02/07/2006