


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 16, 2006 8:00 am**  
**Secretary of State**

03-16-2006 90246 022 \*\*\*150.00

<b>DOCUMENT # G44686</b> 1. Entity Name <b>MITCOR, INC.</b>					
Principal Place of Business <b>4563 NAUTICAL COURT DESTIN, FL 32541</b>			Mailing Address <b>4563 NAUTICAL COURT DESTIN, FL 32541 US</b>		
2. Principal Place of Business <b>4 Sunset Beach Place</b>		3. Mailing Address <b>4 Sunset Beach Place</b>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State <b>Niceville, Florida</b>		City & State <b>Niceville, Florida</b>		4. FEI Number <b>59-2313408</b>	
Zip <b>32578</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>MITCHELL, GARY A 4563 NAUTICAL CT DESTIN, FL 32541</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>4 SUNSET BEACH PLACE</b> City <b>NICEVILLE</b> <b>FL</b> Zip Code <b>32578</b>		
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: <i>[Signature]</i> <b>GARY A. MITCHELL, PRES.</b> <b>2/28/06</b> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D MITCHELL, GARY A 4563 NAUTICAL COURT DESTIN, FL 32541	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>4 SUNSET BEACH PLACE NICEVILLE, FLORIDA 32578</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MITCHELL, DIANE C 4563 NAUTICAL COURT DESTIN, FL 32541	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>4 SUNSET BEACH PLACE NICEVILLE, FLORIDA 32578</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <i>[Signature]</i> <b>GARY A. MITCHELL, PRESIDENT</b> <b>2/28/06</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date</small>					