

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H29892

Entity Name: ENTEC NATIONAL, INC.

FILED  
Mar 24, 2006  
Secretary of State

**Current Principal Place of Business:**

3049 E WITHLACOOCHEE TRAIL  
DUNNELLON, FL 34434 US

**New Principal Place of Business:**

**Current Mailing Address:**

3049 E. WITHLACOOCHEE TRAIL  
DUNNELLON, FL 34434 US

**New Mailing Address:**

FEI Number: 59-2466028

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CONKLIN, CRAIG  
3049 E. WITHLACOOCHEE TRAIL  
DUNNELLON, FL 33434 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: PD ( ) Delete  
Name: CONKLIN, CRAIG  
Address: 3049 E. WITHLACOOCHEE TRAIL  
City-St-Zip: DUNNELLON, FL 34434

Title: S ( ) Delete  
Name: CONKLIN, NANCY  
Address: 3049 E WITHLACOOCHEE TRAIL  
City-St-Zip: DUNNELLON, FL 34434

Title: T ( ) Delete  
Name: SMITH, JOEY  
Address: 4418 SE 15TH STREET  
City-St-Zip: OCALA, FL 34471

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: NANCY CONKLIN

S

03/24/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date