

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H71183

1. Entity Name
FLORICAL SYSTEMS, INC.



Principal Place of Business

4581 NW 6TH ST.
SUITE A
GAINESVILLE, FL 32609

Mailing Address

4581 NW 6TH ST.
SUITE A
GAINESVILLE, FL 32609

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05102006

Chg-P

CR2E034 (11/05)

4. FEI Number

59-2711499

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

Sue G. Knight
as its agent

SIGNATURE: *Sue G. Knight*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

5-16-06

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME MONEYHUN, JAMES O
STREET ADDRESS 4581 A NW 6TH ST
CITY-ST-ZIP GAINESVILLE, FL 32609

TITLE V ☒ Delete
NAME SCANLON, SUNDA S
STREET ADDRESS 4581 A NW 6TH ST
CITY-ST-ZIP GAINESVILLE, FL 32609

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Change ☒ Addition
NAME L. LOWRY MAYS
STREET ADDRESS 200 E. BASSE RD.
CITY-ST-ZIP SAN ANTONIO, TX 78209

TITLE D ☐ Change ☒ Addition
NAME MARK P. MAYS
STREET ADDRESS 200 E. BASSE RD.
CITY-ST-ZIP SAN ANTONIO, TX 78209

TITLE D ☐ Change ☒ Addition
NAME RANDALL T. MAYS
STREET ADDRESS 200 E. BASSE RD.
CITY-ST-ZIP SAN ANTONIO, TX 78209

TITLE P ☐ Change ☒ Addition
NAME JOHN HOGAN
STREET ADDRESS 200 E. BASSE RD.
CITY-ST-ZIP SAN ANTONIO, TX 78209

TITLE P ☐ Change ☒ Addition
NAME TIM GIESCHEN
STREET ADDRESS 214 N SPRUCE
CITY-ST-ZIP OGALLALA, NE 69153

TITLE P ☐ Change ☒ Addition
NAME DAVID JELLISON
STREET ADDRESS 214 N SPRUCE
CITY-ST-ZIP OGALLALA, NE 69153

BLOCK 11 CONTINUED:

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:

T. P. Gieschen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/2006
Date

308 284-5116
Daytime Phone #

MAY 15 2006