

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90369 021 ***158.75

DOCUMENT # H84315 1. Entity Name EARTHBALANCE CORPORATION	
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60030100



Principal Place of Business % JACK O. HACKETT II P.O. DRAWER 511447 PUNTA GORDA, FL 33951-1447	Mailing Address P.O. BOX DRAWER 511447 PUNTA GORDA, FL 33951 US
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2. Principal Place of Business 99 JACK O HACKETT, II Suite, Apt. #, etc. 99 NESBIT STREET City & State PUNTA GORDA FL Zip 33950 Country US	3. Mailing Address 99 NESBIT STREET Suite, Apt. #, etc. 99 NESBIT STREET City & State PUNTA GORDA, FL Zip 33950 Country US
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03312006 Chg-P CR2E034 (11/05)

4. FEI Number 59-2612208	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HACKETT, JACK O., II, ESQUIRE 99 NESBIT STREET PUNTA GORDA, FL 33950	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

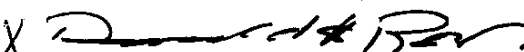
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS KOCUR, CHARLES L JR 27320 EGRET PL. PUNTA GORDA, FL 33983 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KOCUR, CHARLES L., JR. 27320 EGRET PL PUNTA GORDA, FL 33983 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROSS, DONALD H 2579 N. TOLEDO BLADE BOULEVARD NORTH PORT, FL 34289 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT CLANCEY, FRANCIS J 4314 LONGCHAMP DR SARASOTA, FL 33946 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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:  **4/6/06 941 426 7878**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

DONALD H. ROSS, PRESIDENT