## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 15, 2006 08:00 AM Secretary of State

Daytime Phone #

ANNOAL REPORT					Secretary of State			
1. Entity Name	MENT # J15626 EIN & PETREE, P.A.				Seci	ctary 0	i State	
Principal Place 501 N. MAGN SUITE A ORLANDO, FI	NOLIA AVE.	Mailing Address 501 N. MAGNOLIA AVE. SUITE A ORLANDO, FL 32801 US				1/47/ <b>2</b> /1/1/47/2/14/5/37		
D	O NOT WRITE	CE .	02082006 No Chg-P CR2E034 (11/05)  4. FEI Number			Applied For Not Applicable Additional		
6. Name and Address of Current Registered Agent PETREE, R.G. 501 N MAGNOLIA AVE, STE A ORLANDO, FL 32801			DO NOT WRITE IN THIS SPACE					
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 (amiliar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and tiffer if applicable  (NOTE Registered Agent signature required when reinstating)  DATE								
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Finar Trust Fund Contribution.				.00 May Be led to Fees				
ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PETREE, R.G. 501 MAGNOLIA AVE ORLANDO, FL S ROCHE, DREAMA 501 N MAGNOLIA AVE ORLANDO, FL				000000 02/27/06 NOT W THIS SP		7 150.00	
NAME SIREET ADDRESS								

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 respect for the exemption 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.