## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 17, 2006 08:00 AN Secretary of State **DOCUMENT # J33963** 1. Entity Name PETSCHE & ASSOCIATES, INC. Mailing Address Principal Place of Business 2581 METROCENTRE BLVD., STE. 6 2581 METROCENTRE BLVD., STE. 6 WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33407 03062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2738041 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 5. Name and Address of Current Registered Agent PETSCHE, PETER DO NOT WRITE 2581 METROCENTRE BLVD., STE. 6 WEST PALM BEACH, FL 33407 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 familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS UUUUU0511270 PST TITLE 134/29/06-80042-021 150.00 NAME PETSCHE, PETER J. STREET ADDRESS 2581 METROCENTRE BLVD SUITE 6 CITY-ST-ZIP WEST PALM BEACH, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE

12. I hereby certify that the information supplied with this filling 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 attachgent with an address with all other like empowered.

SIGNATURE

NAME STREET ADDRESS CITY-ST-ZIP TIME NAME STREET ADDRESS CITY-ST-ZIF TILE NAME STREET ADDRESS CITY-ST-ZIP

> PETER J. PETSCHE, PRESIDENT

DIRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

640-3800 Daytime Phone #