| 2006 FOR PROFIT CORPORATION ANNUAL REPORT | | | | | | FILED May 01, 2006 8:00 am Secretary of State | | | |
|--|--|--|------------------------------------|-------------------|-------------------------|---|----------------------------------|------------------------------|--|
| 1. Entity Nan | MENT # K01692 | | | | | 90306 045 ***15 | | | |
| Principal Place of Business Mailing Address 9625 WES KEARNEY WAY 9625 WES KEARNEY W RIVERVIEW, FL 33569 US RIVERVIEW, FL 33569 | | | | | ··· | | | | |
| 2. Principal F | Place of Business | 3. Mailing Address | | | | | | | |
| Suite, Apt. | | Suite, Apt. #, etc. | | | 04122006 | Chg-P | CR2E034 (11/05) | • | |
| City & Stat | | City & State | | | 4. FEI Numb 65-001 | | | pplied For lot Applicable | |
| Zip | Country | Zip Coun | | , | 5. Certificate | of Status Desired | \$8.75 Active Fee Require | | |
| 6. Name and Address of Current Registered Agent | | | | | 7. Name and | Address of New I | Registered Agent | | |
| REED, JAMES M 9625 WES KEARNEY WAY RIVERVIEW, FL 33569 | | | - | Street Addre | ss (P.O. Box Numb | er is Not Acceptab | e) | | |
| 8 The above | e named entity submits this statemen | | | City | stered agent or bo | the in the State of E | FL Zip Co | | |
| | tions of registered agent. | | no regionerou | onios or rog. | olored ugenit, or ed | | | r and accept | |
| | Signature, typed or printed name of registered ag | ent and title if applicable. (N 9. Election Cam | | | uired when reinstating) | | DATE | | |
| | E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$55 | | | × _ ` | Added to Fees | | | | |
| 10. TITLE | OFFICERS AN | | 11. TITLE | | ADDITIONS | CHANGES TO OF | FICERS AND DIRECTO | RS IN 11 | |
| NAME STREET ADDRESS CITY-ST-ZIP | KEARNEY, C.W., SR. 9625 WES KEARNEY WAY RIVERVIEW, FL | | NAME | ADORESS I-Zip | | | | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | KEARNEY, BING C JR N/ 9625 WES KERANEY WAY ST | | TITLE NAME STREET CITY-ST | ADDRESS 96 | ARNEY, B 25 WES K | XXChange ☐ Addition RNEY, BING CHARLES W. JR. 5 WES KEARNEY WAY ERVIEW FI, 33569 | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD KEARNEY, JOANNE 9625 WES KEARNEY WAY RIVERVIEW, FL | X Delete | TITLE NAME Street City-Si | ADDRESS 1- ZIP | | | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D KEARNEY, BRYAN 9625 WES KEARNEY WAY RIVERVIEW, FL | Delete | TITLE NAME Street City-St | ADDRESS 1-ZIP | | | Change | Addition | |
| TITLE NAME STREET ADORESS CITY-ST-ZIP | | Delete | TITLE NAME STREET CITY-ST | ADORESS T- ZIP | | | 🗌 Change | Addition | |
| TITLE NAME Street Address City-St-Zip | | Delete | TITLE NAME Street City-Si | ADDRESS T- ZIP | | | Change | Addition | |
| indicated | certify that the information supplied v d on this report or supplemental repo | rt is true and accurate and the | at my signatur | e shall have | the same legal effe | ct as if made under | oath: that I am an office | er or director | |
| f of the co | rporation or the receiver or trustee er I, or on an attachment with an addres | | | d by Chapter | 607, Fiorida Statut | es; and that my har | ne appears in Block 10 | or Block 11 if | |