

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K06300

Entity Name: C. A. CAPITAL CORP.

FILED  
Apr 19, 2006  
Secretary of State

## Current Principal Place of Business:

% CHARLES F. JAMES, III  
BOX 30017  
PENSACOLA, FL 32503

## New Principal Place of Business:

## Current Mailing Address:

% CHARLES F. JAMES, III  
BOX 30017  
PENSACOLA, FL 32503

## New Mailing Address:

FEI Number: 59-2860002

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JAMES, CHARLES F., III  
5412 DYNASTY DRIVE  
PENSACOLA, FL 32504 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: JAMES, CHARLES F., I, II  
Address: 5412 DYNASTY DR  
City-St-Zip: PENSACOLA, FL 32504

Title: S ( ) Delete  
Name: JAMES, CHARLES F. III  
Address: 5412 DYNASTY DR  
City-St-Zip: PENSACOLA, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES F JAMES,111

PRES

04/19/2006

Electronic Signature of Signing Officer or Director

Date