


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 16, 2007 08:00 AM
Secretary of State

DOCUMENT # K56243 1. Entity Name CONSULTATION & MANAGEMENT CORPORATION	
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Principal Place of Business 12730 NEW BRITTANY BLVD. 4-EL FORT MYERS, FL 33907	Mailing Address 12730 NEW BRITTANY BLVD. 4-EL FORT MYERS, FL 33907
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DO NOT WRITE IN THIS SPACE



01032007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0104170	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MEACHAM, MARIETTA C. (C.P.A.) 12730 NEW BRITTANY BLVD., SUITE #301 FORT MYERS, FL 33907

**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 familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000587445 01/17/07-80034-012 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT FRANCHI, DOMINIC 1233 PAR VIEW DR SANIBEL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS FRANCHI, OGLA L. 1233 PAR VIEW DR SANIBEL, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: *Dominic Franchi* **1/10/07 239-275-7175**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #