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Secretary of State
03-07-2006 90001 023 ***158.75

3/7

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K93540

1. Entity Name
PRIVATE CASE MANAGEMENT, INC.

66007165

Principal Place of Business	Mailing Address
380 NO WICKHAM RD. MELBOURNE, FL 32935 US	P O BOX 760 MELBOURNE, FL 32902-0760 US

02232006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
4356 FORTUNE PLACE	
Suite, Apt. #, etc. B	Suite, Apt. #, etc.
City & State W MELBOURNE FL	City & State
Zip 32904	Country BREVARD
Zip	Country

4. FEI Number
59-2957123
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
THOMPSON, LYNNE 304 SO HARBOR CITY BLVD. SUITE 200 MELBOURNE, FL 32901	Name: JOSEPH MINICLIER Street Address (P.O. Box Number is Not Acceptable): 1970 MICHIGAN AVE BLDG E City: COCOA FL Zip Code: 32926

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] 3/1/06
Signature, typed or printed name of registered agent and title 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 Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT WHITLEY, BARBARA R. 380 NO WICKHAM ROAD SUITE I (ALPHA) MELBOURNE, FL 32935	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 4356 FORTUNE PLACE "B" W MELBOURNE FL 32904
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WHITLEY,,CHARLES 380 NO WICKHAM ROAD SUITE I (ALPHA) MELBOURNE, FL 32935	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 4356 FORTUNE PLACE "B" W MELBOURNE FL 32904
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WHITLEY, JULIE 5410 BROWNELL ST. ORLANDO, FL 32810	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 2408 JAMIE CIRCLE ORLANDO FL 32803
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Barbara Whitley 3-20-06 (321) 674-6070
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone Number