

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L69259

1. Entity Name
ARBUCKLE & ARBUCKLE, INC.



Principal Place of Business
**322 FIFTH AVE.
INDIALANTIC, FL 32903**

Mailing Address
**322 FIFTH AVE.
INDIALANTIC, FL 32903**



01132006 No Chg-P CRZE034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3009516

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ARBUCKLE, KENNETH A
322 FIFTH AVE.
INDIALANTIC, FL 32903**

**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

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

TITLE PD
NAME ARBUCKLE, KENNETH A
STREET ADDRESS 301 SHANNON
CITY-ST-ZIP MELBOURNE BEACH, FL

TITLE VS
NAME ARBUCKLE, KAREN
STREET ADDRESS 301 SHANNON AVE
CITY-ST-ZIP SEBASTIAN, FL 32958

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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U00000510481
04/29/06-80007-023 150.00

**DO NOT WRITE
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:

Karen Arbuckle

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/2006

Date

321-9723-320

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