

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2006 8:00 am
Secretary of State

DOCUMENT # L97070

1. Entity Name
ANU TWIST VENTURES, INC.



Principal Place of Business
**7296 SWAN LAKE DRIVE
FORT MYERS, FL 33919**

Mailing Address
**7296 SWAN LAKE DRIVE
FORT MYERS, FL 33919**



02152006 No Chg-P CR2E034 (11/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0213828

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BRENNAN, ANDREW J
7296 SWAN LAKE DRIVE
FORT MYERS, FL 33919**

**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

(NOTE: Registered Agent signature is required when completing)

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 | P | DELETE |
| NAME | BRENNAN, ANDREW J | |
| STREET ADDRESS | 7296 SWAN LAKE DRIVE | |
| CITY-ST-ZIP | FORT MYERS, FL 33919 | |
| TITLE | DPVST | |
| NAME | Kathleen Brennan | |
| STREET ADDRESS | 7296 Swan Lake Drive | |
| CITY-ST-ZIP | Fort Myers FL 33919 | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

**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:

4-03-06

239-466-4777