

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M84694

FILED
Apr 20, 2006
Secretary of State

Entity Name: KOOTER BROWNS OF FLORIDA, INC.

Current Principal Place of Business:

6014 NORTH NINTH AVENUE
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

6014 NORTH NINTH AVENUE
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 59-2892529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, PAMELA S
5886 SHIMMERING PINES STREET
PACE2, FL 32571 US

Name and Address of New Registered Agent:

THOMPSON, PAMELA S
5886 SHIMMERING PINES STREET
PACE, FL 32571 US

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:

04/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: WALLER, WILLIAM R..
Address: 6121 ALICIA DR. PINES ST.
City-St-Zip: PACE, FL

Title: SD () Delete
Name: ROGERS, W.W. III
Address: 7853 PETERSEN POINT
City-St-Zip: MILTON, FL

Title: PD () Delete
Name: THOMPSON, PAMELA S
Address: 5886 SHIMMERING PINES STREET
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: PAMELA S. THOMPSON

PD

04/20/2006

Electronic Signature of Signing Officer or Director

Date