2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 20, 2006 08:00 AN Secretary of State

ANNUAL REPORT							00.00
1. Entity Nan	MENT # M84728 ON FORMS, INC.	-			S	ecretai	ry of Stat
% PEGGY R. 1813 SAGEV		Mailing Address % PEGGY R. SMITH 1813 SAGEWAY DRIVE TALLAHASSEE, FL 32303					
DO NOT WRITE IN THIS SPA			CE	01192006 No Chg-P CR2E034 (11/05) 4. FEI Number			
6. Name and Address of Current Registered Agent SMITH, PEGGY R. 1813 SAGEWAY DRIVE TALLAHASSEE, FL 32303					NOT W		
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 size if applicable. (NOTE Registered Agent signature regulated when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.			ncing \$	5.00 May Be dded to Fees			
10. OFFICERS AND DIRECTORS TITLE DVT NAME SMITH, PEGGY R. STREET ADDRESS 1813 SAGEWAY DRIVE CITY-SI-ZIP TALLAHASSEE, FL 323037327 TITLE					00000 05/02/08)0521632 5-80144-0	11 150.00
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		·		DO	NOT W	/RITE	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			IN THIS SPACE				
STREET ADDRESS	1		1				

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 attach field with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/06 850,562,87/6