

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000541

FILED
Jan 20, 2006
Secretary of State

Entity Name: PALM COAST BUSINESS AND PROFESSIONAL NETWORK, INC.

Current Principal Place of Business:

268-A PALM COAST PARKWAY NE
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

86 WESTMORELAND DRIVE
PALM COAST, FL 32164

New Mailing Address:

FEI Number: 59-3694362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLS, FRED
86 WESTMORELAND DRIVE
PALM COAST, FL 32164 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: MR. () Delete
Name: MILLS, FRED
Address: 86 WESTMORELAND DRIVE
City-St-Zip: PALM COAST, FL 32164

Title: MRS. () Delete
Name: SWANSON, LUCY
Address: 531 CYPRESS EDGE DR.
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: MR. (X) Change () Addition
Name: RESSLER, JAMIE
Address: 9 WOODSTON LANE
City-St-Zip: PALM COAST, FL 32164

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRED MILLS

PRES

01/20/2006

Electronic Signature of Signing Officer or Director

Date