

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000479

FILED  
Feb 22, 2006  
Secretary of State

Entity Name: MONEY MANAGERS, INCORPORATED

**Current Principal Place of Business:**

100 1ST AVE S.  
SUITE 293  
ST. PETERSBURG, FL 33701

**New Principal Place of Business:**

111 2ND AVE NE  
SUITE 315  
ST. PETERSBURG, FL 33701

**Current Mailing Address:**

P.O. BOX 738  
ST. PETERSBURG, FL 33731

**New Mailing Address:**

FEI Number: 59-3566624      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134      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: D      ( ) Delete  
Name: MAGRO, JONATHAN S  
Address: P.O. BOX 738  
City-St-Zip: ST. PETERSBURG, FL 33731

Title: D      ( ) Delete  
Name: DESMOND, RACHAEL C  
Address: 2335 DEERCREEK TRAIL  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: D      ( ) Delete  
Name: MAGRO, CONNIE  
Address: 11461 TUSCANNY AVE  
City-St-Zip: SPRING HILL, FL 34608

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

SIGNATURE: JONATHAN S. MAGRO

D

02/22/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date