2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2006 8:00 am
Secretary of State
03-20-2006 90011 016 ****61.25

DOCUMENT # N05000003389

1. Entity Name

THE PHYLLIS MERRITT SINGERS, INC.

Principal Place of Business	Mailing Address
5610 VESTAVIA AVE PRNSACOLA FL 32526	5610 VESTAVIA AVE PRNSACOLA FL 32526

2. Principal Place of Business	3. Mailing Address
6609 Chelsea St	6609 Chelsea St
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pensacola FL	City & State: Pensacola FL
Zip: 32506 Country: Escambia	Zip: 32506 Country: Escambia

1st MOORE CR2E037 (10/05)

4. FEI Number: 20-0529776 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~EDGE, MARY~~ ~~5610 VESTAVIA AVE~~ ~~PRNSACOLA FL 32526~~ 6609 Chelsea St Pensacola FL 32506	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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: Mary Edge 2-4-06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP EDGE, MARY ~~5610 VESTAVIA AVE~~ ~~PRNSACOLA FL 32526~~ 6609 Chelsea St Pensacola FL 32506	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT BURLESON, SUSAN B 1700 E GADSDEN ST PENSACOLA FL 32501	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS WILLIAMS, TERI 828 CHALLEN CIR N MOBILE AL 36608	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOUTWELL, RHONDA 4509 CREEKMOOR DR PENSACOLA FL 32501	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WILLIAMS, TERI 828 CHALLEN CIR N MOBILE AL 36608	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHRISTENOT, GARY 907 CLOVERDALE CT FT WALTON BCH FL 32547	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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: Mary Ge Edge 2/4/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #