


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 03, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # N38307**

1. Entity Name  
**GET UNIFIED NOW POLITICAL ACTION COMMITTEE, INC.**



Principal Place of Business <b>C/O KENNETH S. BEALL, JR.          777 S. FLAGLER DR. #500 EAST          WEST PALM BEACH, FL 33401</b>	Mailing Address <b>C/O KENNETH S. BEALL, JR.          777 S. FLAGLER DR. #500 EAST          WEST PALM BEACH, FL 33401</b>
--	--



03292006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0216116</b>	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

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

6. Name and Address of Current Registered Agent

**COX, ERNEST A III  
 777 S. FLAGLER DRIVE  
 SUITE 500E  
 WEST PALM BEACH, FL 33401**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$81.25  
 Due by May 1, 2006**

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

U00000481035  
 04/19/06-80006-010 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O COX, ERNEST A III 777 S FLAGLER DR #500 E WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BRINDELL, JAMES R. 777 S FLAGLER DR #500 E WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CARMODY, JOHN T., JR. 10 CENTRAL PKWY #400 STUART, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HALL, D 500 E BROWARD BLVD., SUITE 1400 FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KASDIN, NEISEN 2 SOUTH BISCAYNE BLVD, #3400 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SNOWDEN, DAVID 777 S. FLAGLER DRIVE SUITE 500 E WEST PALM BEACH, FL 33401

**DO NOT WRITE IN THIS SPACE**

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 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:   
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/06 562650  
 Date Daytime Phone #