

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000008886

1. Entity Name
NET BOY CONSULTING GROUP, INC.



Principal Place of Business
**154 W. 6TH STREET
JACKSONVILLE, FL 32206**

Mailing Address
**P.O. BOX 2015
JACKSONVILLE, FL 32203**

DO NOT WRITE IN THIS SPACE



04062006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3621991

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SPANN, BARNEY
154 W. 6TH ST.
JACKSONVILLE, FL 32206**

**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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SPANN, WILLIE
2573 MINOSA CIRCLE NORTH
JACKSONVILLE, FL 32209**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SPANN, DARLENE
154 W 6TH STREET
JACKSONVILLE, FL 32206**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
SPANN, BARNEY
154 W 6TH STREET
JACKSONVILLE, FL 32206**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SPANN, AMANDA
154 W. 6TH ST.
JACKSONVILLE, FL 32206**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000518212
05/02/06 00001-017 150.00

**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 607, 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: Barney E Span Barney E Span 4/12/2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #