

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000037945

FILED
Apr 21, 2006
Secretary of State

Entity Name: OMEGA CAPITAL CORPORARION

Current Principal Place of Business:

3800 TAMIAMI TRAIL
209
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

4944 KESTRAL PKWY N
SARASOTA, FL 34231

New Mailing Address:

4944 KESTRAL PKWY. CIRCLE
SARASOTA, FL 34231

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIRTLEY, WILLIAM T
2940 SO. TAMIAMI TRAIL
SARASOTA, FL 34239 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: ABEL, ROBERT
Address: 333 GIVENS ST
City-St-Zip: SARASOTA, FL 34242

Title: V () Delete
Name: ABEL, WILLIAM T
Address: 3315 FLORAL AVE
City-St-Zip: WEST PALM BEACH, FL 33407

Title: ST () Delete
Name: ABEL, TAYLOR D
Address: 584 HARMORA AVE
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: ABEL, ROBERT
Address: 4944 KESTRAL PARK CIRCLE
City-St-Zip: SARASOTA, FL 34231

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

Title: ST (X) Change () Addition
Name: KINCAID, THOMAS D
Address: 3800 TAMIAMI TR.
City-St-Zip: SARASOTA, FL 34239

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

SIGNATURE: ROBERT ABEL

P

04/21/2006

Electronic Signature of Signing Officer or Director

Date