2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000047515

1. Entity Name
JARMANN OF CAPE CORAL, INC.

Principal Place of Business	Mailing Address
904 S.E. 14TH AVENUE CAPE CORAL, FL 33990	904 S.E. 14TH AVENUE CAPE CORAL, FL 33990

DO NOT WRITE IN THIS SPACE

041112006 No Chg-P CR2E034 (11/05)

4. FEI Number
66-1006459

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MANN, RICHARD C
1201 SOUTHEAST 5TH STREET
CAPE CORAL, FL 33990

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

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	P
NAME	MANN, RICHARD C
STREET ADDRESS	1201 SE 5TH ST.
CITY-ST-ZIP	CAPE CORAL, FL 33990
TITLE	VP
NAME	WARE, LINDA J
STREET ADDRESS	106 NORTHEAST 31ST TERRAVE
CITY-ST-ZIP	CAPE CORAL, FL 33909
TITLE	ST
NAME	MANN, DANA L
STREET ADDRESS	1201 SE 5TH ST.
CITY-ST-ZIP	CAPE CORAL, FL 33990
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/27/06-30033-012 150.00

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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: Richard C Mann RICHARD C. MANN 4-11-06 239-574-5001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #