## 2006 FOR PROFIT CORPORATION

## Mar 28, 2006 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # P00000081442** 1. Entity Name DON-MADE, INC. Principal Place of Business Mailing Address 9283 S.E. SATURN STREET POST OFFICE BOX 1072 HOBE SOUND, FL 33475-1072 HOBE SOUND, FL 33455 03232006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FE) Number 65-1037457 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BASS, DONALD L DO NOT WRITE 7166 S.E. OSPREY STREET HOBE SOUND, FL 33455 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. 1 am familiar with, and accept the obligations of registered agent. 3/23/06 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent aignature required when rematating) UU00000483311 9. Election Campaign Financing \$5.00 May 8e FILE NOW!!! FEE 15 \$150.00 After May 1, 2006 Fee will be \$550.00 04/11/06-80117-001 300.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME FOLEY, DONALD P IN 9283 S.E. SATURN STREET STREET ADDRESS CITY-ST-ZIP HOBE SOUND, FL 33455 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-ST-ZIP

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 cath; 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.

FICER OR DIRECTOR

SIGNATURE:

**FILED** 

Daytims Phone #