## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: \_

## FILED Mar 28, 2006 08:00 AM Secretary of State

DOCUMENT # P0000084907 1. Entity Name OLGA FREEMAN, P.A.			Secretary of State				
	ce of Business Mailing Address ONBILL LANE 11651 SPOON FL 33913 FT. MYERS, FL						
DO NOT WRITE IN THIS SPAC			- FEITOMBBI				Applied For Not Applicable
	6. Name and Address of Current Registered Agent				<del></del>	1001	rodnien
FREEMAN, OLGA 11661 SPOONBILL LANE FT. MYERS, FL 33913			DO NOT WRITE IN THIS SPACE				
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, types of printed name of registered agent and title if applicable. (ROTE, Registered Agent signature required when refractions)  DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  S. Election Pempaign Figure 5.00 May Be Trust Fund Contribution.   Added to Fees							
10.	OFFICERS AND DIRECTORS					•	<del></del>
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PVTS FREEMAN, OLGA 11651 SPOONBILL LANE FT. MYERS, FL 33913						
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	HIS SP	ACE	-
NAME STREET ADDRESS CITY-ST-ZIP							
name Street adoress City-St-Zip			_		water a second to the control		
12. I hereby c indicated of the corr changed,	ertify that the information supplied with this filing does not on this report or suppliemental report is true and accurate an obration or the receive for this tell empowered to execute this or on an attachment with per address, with all other like empowers.	ualify for the exe of that my signate report as require owered.	mptions contained ure shall have the sa ad by Chapter 607,	in Chapter 119, F ame legal effect a Florida Statutes;	Florida Statutes, I fu is if made under ca and that my name	urther certify that th; that I am an appears in Bloc	i the information difficer or director k 10 or Block 11 if