

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000093942

Entity Name: SYSTEMS PROMPT, INC.

FILED
Mar 03, 2006
Secretary of State

Current Principal Place of Business:

1108C N. 12TH AVE
PENSACOLA, FL 32501 US

New Principal Place of Business:

1090 CRANE COVE BLVD
GULF BREEZE, FL 32563 US

Current Mailing Address:

4771 BAYOU BLVD
309
PENSACOLA, FL 32503 US

New Mailing Address:

3749D GULF BREEZE PKWY.
341
GULF BREEZE, FL 32563 US

FEI Number: 57-1108399

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWNING, CHRISTOPHER S
1090 CRANE COVE BLVD
GULF BREEZE, FL 32563 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: P/T () Delete
Name: BROWNING, CHRISTOPHER S
Address: 1090 CRANE COVE BLVD
City-St-Zip: GULF BREEZE, FL 32563 US

Title: V/S (X) Delete
Name: LUNSFORD, THOMAS R
Address: 1619 E. LLOYD ST.
City-St-Zip: PENSACOLA, FL 32503 US

Title: D (X) Delete
Name: CRANE, STEPHEN P
Address: 1208 E. YONGE ST.
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: BROWNING, CHRISTOPHER S
Address: 1090 CRANE COVE BLVD
City-St-Zip: GULF BREEZE, FL 32563 US

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

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

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: CHRISTOPHER S. BROWNING

PTS

03/03/2006

Electronic Signature of Signing Officer or Director

Date