

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2006 8:00 am
Secretary of State

05-08-2006 90286 024 ****50.00
07-11-2006 90023 026 ***100.00

DOCUMENT # P01000005790 1. Entry Name MELISSA K. RICE, PA																															
Principal Place of Business 1900 MAIN STREET, SUITE 300 SARASOTA, FL 34236		Mailing Address 1900 MAIN STREET, SUITE 300 SARASOTA, FL 34236																													
2. Principal Place of Business 2801 Fruitville Rd Suite, Apt. #, etc. Suite 1160 City & State Sarasota, FL Zip 34237		3. Mailing Address & Same Suite, Apt. #, etc. & Same City & State & Same Zip & Same																													
4. FEI Number 65-1068531		Applied For ☐ Not Applicable																													
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																													
6. Name and Address of Current Registered Agent RICE, MELISSA K 1900 MAIN STREET, SUITE 300 SARASOTA, FL 34236		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																													
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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)																															
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																													
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY - ST - ZIP </td> <td style="width: 50%; padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> RICE, MELISSA K ESQ 1900 MAIN STREET SUITE 300 SARASOTA, FL 34236 </td> <td style="padding: 2px;"></td> </tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Delete</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Delete</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Delete</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Delete</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Delete</td></tr> </table>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	RICE, MELISSA K ESQ 1900 MAIN STREET SUITE 300 SARASOTA, FL 34236			☐ Delete		☐ Delete		☐ Delete		☐ Delete		☐ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY - ST - ZIP </td> <td style="width: 50%; padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;"> 2801 Fruitville Rd Ste 1160 Sarasota, FL 34237 </td> <td style="padding: 2px;"></td> </tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> </table>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	2801 Fruitville Rd Ste 1160 Sarasota, FL 34237			☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
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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 recipient 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 employment.																															
SIGNATURE: _____ Signature, typed or printed name of signing officer or director																															