

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000007242

FILED  
Apr 18, 2006  
Secretary of State

Entity Name: PHANTOMS MANUFACTURING, INC.

## Current Principal Place of Business:

3511 N LIBERTY STREET  
JACKSONVILLE, FL 32206

## New Principal Place of Business:

## Current Mailing Address:

3511 N LIBERTY STREET  
JACKSONVILLE, FL 32206

## New Mailing Address:

FEI Number: 59-3696235

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RASBEARY, TIMOTHY W  
1382 HARRISON POINT TRAIL  
JACKSONVILLE, FL 32034 US

## Name and Address of New Registered Agent:

RASBEARY, TIMOTHY W  
1382 HARRISON POINT TRAIL  
FERNANDINA BEACH, FL 32034 US

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:

04/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: RASBEARY, TIMOTHY W  
Address: 1382 HARRISON POINT TRAIL  
City-St-Zip: JACKSONVILLE, FL 32034

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: RASBEARY, TIMOTHY W  
Address: 1382 HARRISON POINT TRAIL  
City-St-Zip: FERNANDINA BEACH, FL 32034

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: TIMOTHY W. RASBEARY

DP

04/18/2006

Electronic Signature of Signing Officer or Director

Date