

FILED
Apr 03, 2006 8:00 am
Secretary of State

02-22-2006 90016 040 ***150.00

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P01000009382		
1. Entity Name MANCIL & CO., INC.		
Principal Place of Business 3182 SE BROOK STREET STUART, FL 34997		Mailing Address 3182 SE BROOK STREET STUART, FL 34997
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MANCIL, DON R SR 3182 SE BROOK STREET STUART, FL 34997		DO NOT WRITE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <i>Don R Mancil Sr.</i> DATE: <i>3-10-06</i> (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing.)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE	DP	
NAME	MANCIL, DON R SR	
STREET ADDRESS	3182 SE BROOK STREET	
CITY - ST - ZIP	STUART, FL 34997	
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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <i>Don R Mancil Sr.</i>		3-26-06 771-260-0735
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date

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