

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000046224

FILED
Apr 17, 2006
Secretary of State

Entity Name: ST. JOHN RESEARCH AND CONSULTING, INC.

Current Principal Place of Business:

633 GARLAND CIRCLE
INDIAN ROCKS BEACH, FL 33785

New Principal Place of Business:

502 GARLAND CIRCLE
INDIAN ROCKS BEACH, FL 33785

Current Mailing Address:

633 GARLAND CIRCLE
INDIAN ROCKS BEACH, FL 33785

New Mailing Address:

502 GARLAND CIRCLE
INDIAN ROCKS BEACH, FL 33785

FEI Number: 59-3716896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARQUARDT, J. MATTHEW ESQ.
625 COURT STREET, SUITE 200
CLEARWATER, FL 33756 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 () Delete
Name: ST. JOHN, CHARLES K K
Address: 633 GARLAND CIRCLE
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ST. JOHN, CHARLES K
Address: 502 GARLAND CIRCLE
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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: CHARLES K. ST. JOHN

P

04/17/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date