# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 03, 2006 08:00 AM**
**Secretary of State**

DOCUMENT # P01000080099

1. Entity Name
THE MASTER'S MEN QUARTET, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 5692 TREVINO DRIVE<br>MILTON, FL 32570 | 5692 TREVINO DRIVE<br>MILTON, FL 32570 |

DO NOT WRITE IN THIS SPACE

02202006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3734651
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RILEY, CHARLES G JR
5692 TREVINO DRIVE
MILTON, FL 32570

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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 | D |
| NAME | SMITH, CHARLIE E |
| STREET ADDRESS | 3105 SONYA STREET |
| CITY-ST-ZIP | PACE, FL 32571 |
| TITLE | D |
| NAME | MASSEY, TERRY V |
| STREET ADDRESS | 2200 HWY 182 |
| CITY-ST-ZIP | JAY, FL 32565 |
| TITLE | D |
| NAME | RILEY, CHARLES G JR |
| STREET ADDRESS | 5692 TREVINO DRIVE |
| CITY-ST-ZIP | MILTON, FL 32570 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
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| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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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 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 as changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: President 2/28/06