## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000089428

Entity Name: CO-ADVANTAGE RESOURCES-FLORIDA, INC.

FILED Apr 17, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
111 W JEFI ORLANDO,	FERSON ST S FL 32801	TE 100						
Current Mailing Address:				New Mailing Address:				
111 W JEFF ORLANDO,	FERSON ST S FL 32801	TE 100						
FEI Number:	65-1141340	FEI Number Applied For ( )	FEI Num	ber Not Appli	cable ( )	Certifica	ate of Status Desired ( )	
Name and	Address of Cu	ırrent Registered Agent:	Name and	me and Address of New Registered Agent:				
COURTNEY, CALVERT N 4900 MANATEE AVE WEST STE 101 BRADENTON, FL 34209 US				ROBBINSON, WILLIAM H JR 111 W JEFFERSON STREET SUITE 100 ORLANDO, FL 32801 US				
The above in the State		ubmits this statement for the pu	rpose of	changing it	s registered o	office or r	registered agent, or bo	oth,
SIGNATUR	E: WILLIAM F	04/17/2006						
	Electronic	Signature of Registered Agen	t				Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$				
Title: Name: Address: City-St-Zip:	D () [ WILLIAMS, DAYI 111 W JEFFERS ORLANDO, FL 3	ON ST STE 100		Title: Name: Address: City-St-Zip:	(	) Change	( ) Addition	
Title: Name: Address: City-St-Zip:	CFO ()[ LOWREY, MARK 111 W JEFFERS ORLANDO, FL 3	ON ST STE 100		Title: Name: Address: City-St-Zip:	(	) Change	( ) Addition	
Title: Name: Address: City-St-Zip:	P ()[ HEWITT, BEN 111 W JEFFERS ORLANDO, FL 3			Title: Name: Address: City-St-Zip:	(	) Change	( ) Addition	
Title: Name: Address: City-St-Zip:	S ()[ ROBBINSON, WI 111 W JEFFERS ORLANDO, FL 3	ON ST STE 100		Title: Name: Address: City-St-Zip:	S (X ROBBINSON, Y 111 W JEFFEI ORLANDO, FL	WILLIAM F RSON ST S		
Title: Name: Address: City-St-Zip:	VP () [ GOIN, BRUCE 111 W JEFFERS ORLANDO, FL 3			Title: Name: Address: City-St-Zip:	(	) Change	( ) Addition	
Title: Name: Address: City-St-Zip:	D ()ERILEY, JOHN 111 W JEFFERS ORLANDO, FL 3			Title: Name: Address: City-St-Zip:	(	) Change	( ) Addition	

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: WILLIAM H ROBBINSON JR S 04/17/2006