2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000095761

 Entity Name SANDRA YEARWOOD, INC.



FILED Feb 03, 2006 08:00 AM Secretary of State

Principal Place of Business

CITY-ST-78P

3060 S. ATLANTIC AVENUE DAYTONA BEACH SHORES, FL 32118 Mailing Address

3060 S. ATLANTIC AVENUE DAYTONA BEACH SHORES, FL 32118



DO NOT WRITE IN THIS SPACE

01202000		no ong .	011200	0/120221 (17700)			
4.	FEI Number			- [Applied For		
	59-37523	50			Not Applicable		

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

YEARWOOD, SANDRA 3080 S. ATLANTIC AVENUE DAYTONA BEACH SHORES, FL 32118

DO NOT WRITE IN THIS SPACE

			j		
8. The above the obligat	named entity submits this statement for the priors of registered agent.	urpose of changing its reg	istered office or r	egistered agent, or bo	ith, in the State of Florida. I am lamillar with, and accept
SIGNATURE.					N=
	Signature, typed or printed name of registered egent and title if	applicable (NOTE Re	gistered Agent signature	required when reinstating)	DATE
FiLE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ☐ Added to Fees			
10.	OFFICERS AND DIREC	TORS		-	
Title Name Street aderess City-St-219	D YEARWOOD, SANDRA 3333 S. ATLANTIC AVENUE, UNIT 80 DAYTONA BEACH SHORES, FL 321'				
title Name Street adoress City-St-Zip					000000418329 02/14/06-80003-803 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
INTLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

12. Thereby certify that the information supplied with this filling 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 path; 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 SIGNATURE AND TYPED DR PRINTED HAVE OF BISHING OF TICER OR DIRECT

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