

2006 FORT PROFT CORPORATION
ANNUAL REPORT

DOCUMENT # P01000106941

1. Entity Name
LARRY D. ALMAND ENTERPRISES, INC.



Principal Place of Business
4911 S.W. 114TH WAY
FT. LAUDERDALE, FL 33330

Mailing Address
4911 S.W. 114TH WAY
FT. LAUDERDALE, FL 33330

FILED
May 01, 2006 08:00 AM
Secretary of State



01042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1150452 Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ALMAND, LARRY D
4911 S.W. 114TH WAY
FT. LAUDERDALE, FL 33330

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

1100000554025
05/15/06-80077-008 158.75

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ALMAND, LARRY D
STREET ADDRESS	4911 S.W. 114TH WAY
CITY-ST-ZIP	FT. LAUDERDALE, FL 33330
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

Larry D. Almand LARRY D. ALMAND

4/25/06 (954) 253-9057

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #