


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000121855		
1. Entry Name IDELLE PAASCHE-SAUNDERS CO.		
Principal Place of Business 785 HARBOUR ISLES CT NORTH BEACH GARDENS, FL 33410	Mailing Address 785 HARBOUR ISLES CT NORTH BEACH GARDENS, FL 33410	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent PAASCHE-SAUNDERS, IDELLE 785 HARBOUR ISLES CT PALM BEACH GARDENS, FL 33410		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE	D	
NAME	PAASCHE-SAUNDERS, IDELLE	
STREET ADDRESS	785 HARBOUR ISLE COURT	
CITY-ST-ZIP	PALM BEACH SHORES, FL 33404	
TITLE		
NAME		
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NAME		
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CITY-ST-ZIP		
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. <i>IDELLE PAASCHE-SAUNDERS</i>		
SIGNATURE: <i>Idelle Paasche-Saunders</i>		Date <i>4/11/06</i> Daytime Phone # <i>561-493-8068</i>



03072006 No Chg-P CR2E034 (11/05)

4. FEI Number 30-0018780	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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04/29/06-80077-001 150.00~M

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