## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 27, 2006 8:00 am Secretary of State

1. Entity Name DANNETTE BROOKS, P.A.					02-27-2006 9	90059 020 ***150.	.00
Principal Plac	e of Rusiness	) Mailing Address 4113 W 22ND ST	2275 SC/6~1C	<del> </del> 4,			
4113 W 22N	1151 - 2275 SCHNIC H		- PENSAL	HI DUA, FL	52503	r ·	
<del>Panama cit</del>	PANSACO LA FIL	PANAMA GITY, FL-3240	)5		, s		
5 B (() B	3250	3. Mailing Address					
2. Principal P	Scenic Huy				d <b>og</b> hi prib foru bika dibi) lod	<b> 51</b>          <b>51</b>	
Suite, Apt. #, etc.  Suite, Apt. #, etc.				02242006	Chg-P	CR2E034 (11/05)	
Pensacola, 26 City & State				4. FEI Numbe		<u> </u>	oplied For ot Applicable
3250	Country , '	Zip	Country		of Status Desired	\$8.75 Add Fee Require	ditional
	6. Name and Address of Current R	Name	_ 7. Name and	Address of New R	egistered Agent		
	RAYMOND G						
	BREEZE PKWY #5 EEZE, FL 32561	Street Address	(P.O. Box Numbe	r is Not Acceptable	2)		
			City			Zip Code	ia .
e The shove	and antibus showing this statement for	the evenage of changing its		areat ar ba	in the State of Ek		
	named entity submits this statement for titions of registered agent.	ne purpose от спануну къ	registered onice or registe	red agent, or bot	In the State of Fig.	MOS. I SIII ISII IIII WILI,	Sug sceept
SIGNATURE.							}
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature, typed or printed name of registered agent and title if applicable.				d when reinstating)	<u> </u>	DATE	
	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	9. Election Campai Trust Fund Conti		0.00 May Be ded to Fees		·	
10.	OFFICERS AND D	IRECTORS	11.	ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTORS	S IN 11
TITLE . >	D BROOKS, DANNETTE	TITLE NAME			Change	Addition	
STREET ADDRESS							
CITY-ST-ZIP	PENSACOLA, FL 32503		CITY-SI-ZIP				
TITLE NAME		☐ Delete	TITLE NAMÉ			☐ Change	☐ Addition
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				- Addition
TITLE NAME		☐ Delete	TITLE NAME			☐ Change	Addition
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP		☐ Delete	CITY-ST-ZIP TITLE			Change	☐ Addition
NAME		L. Delete	NAME			C Cutaige	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
TITLE		Delete	TITLE			☐ Change	☐ Addition
NAME		Delete	NAME				
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition
NAME	1	_	NAME			•	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		1		
1	I certify that the information supplied with t on this report or supplemental report is t rporation or the receiver or trustee empoy	his filing does not qualify fo		d in Chanter 119	Florida Statutes 1	further earlify that the i	-1
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