


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 07, 2006 8:00 am**  
**Secretary of State**

02-07-2006 90030 033 \*\*\*150.00

<b>DOCUMENT # P02000033117</b> 1. Entity Name CD MOUNTAIN PROPERTIES, INC.	
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Principal Place of Business 3333 WEST KENNEDY BLVD STE 206 TAMPA, FL 33609	Mailing Address 3333 WEST KENNEDY BLVD STE 206 TAMPA, FL 33609
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**DO NOT WRITE IN THIS SPACE**



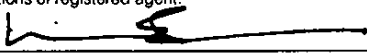
01202006 No Chg-P CR2E034 (11/05)

4. FEI Number 01-0648698	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  WATERS, GODY W 501 E KENNEDY BLVD STE 1700 TAMPA, FL 33602 Robert T. Curtis 3333 W. Kennedy Blvd, Ste 206 Tampa, FL 33609
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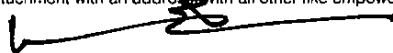
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  JAN 23, 2006 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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<b>10. OFFICERS AND DIRECTORS</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CURTIS, ROBERT T 3333 WEST KENNEDY BLVD STE 206 TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CURTIS, WILLIAM P 3333 WEST KENNEDY BLVD STE 206 TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CURTIS, DANIEL B 3333 WEST KENNEDY BLVD STE 206 TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DICKSON, LAWRENCE F 3333 WEST KENNEDY BLVD STE 206 TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAHNKE, NICHOLAS E 3333 WEST KENNEDY BLVD STE 206 TAMPA, FL 33609
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:  JAN 23, 2006 813 8756324 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
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