

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000065397

Entity Name: SCARR & HARTSELLE, INC.

FILED
Feb 22, 2006
Secretary of State

Current Principal Place of Business:

8200 113TH STREET NORTH
SUITE 2A
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

8200 113TH STREET NORTH
SUITE 2A
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 48-1262072 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIESET, JAMES R
6740-D CROSSWINDS DR N
ST PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HARTSELLE, ART PRES
Address: 8229 113TH STREET
City-St-Zip: SEMINLE, FL 33776 US

Title: VPRES () Delete
Name: SCARR, BARRY J VP
Address: 13030 PARK BLVD.
City-St-Zip: SEMINOLE, FL 33776 US

Title: DIR () Delete
Name: SCARR, TONI S DIR
Address: 13047 PARK BLVD.
City-St-Zip: SEMINOLE, FL 33776 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HARTSELLE, ART PRES
Address: 8200 113TH STREET NORTH, SUITE 2A
City-St-Zip: SEMINOLE, FL 33772 US

Title: VPRES (X) Change () Addition
Name: SCARR, BARRY J VP
Address: 8200 113TH STREET NORTH, SUITE 2A
City-St-Zip: SEMINOLE, FL 33772 US

Title: DIR (X) Change () Addition
Name: SCARR, TONI S DIR
Address: 8200 113TH STREET NORTH SUITE 2A
City-St-Zip: SEMINOLE, FL 33772 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ART HARTSELLE

PRES

02/22/2006

Electronic Signature of Signing Officer or Director

_____ Date