

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000106760 1. Entity Name PROFESSIONAL MEETING PLANNERS, INC.		
Principal Place of Business 584 DOWLING CIRCLE LADY LAKE, FL 32159	Mailing Address 584 DOWLING CIRCLE LADY LAKE, FL 32159	U00000446831 03/08/06-80030-004 150.00  01122006 No Chg-P CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE		4. FEI Number 75-3083794
6. Name and Address of Current Registered Agent PHELPS, PAULINE 584 DOWLING CIRCLE LADY LAKE, FL 32159		Applied For <input type="checkbox"/> Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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 _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable.</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		DO NOT WRITE IN THIS SPACE
TITLE	PD	
NAME	PHELPS, PAULINE	
STREET ADDRESS	584 DOWLING CIRCLE	
CITY-ST-ZIP	LADY LAKE, FL 32159	
TITLE	VS	
NAME	RUTHERFORD, LILLIAN	
STREET ADDRESS	39940 GRAYS AIRPORT RD	
CITY-ST-ZIP	LADY LAKE, FL 32159	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
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 an other title empowered.		
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 2/20/06 <small>Daytime Phone #</small>