

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000125962

Entity Name: FMF CORPORATION

FILED
Feb 13, 2006
Secretary of State

Current Principal Place of Business:

887 DEAN WAY
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

887 DEAN WAY
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 02-0653653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLINE, CAROLYN
887 DEAN WAY
FORT MYERS, FL 33919 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: PTD () Delete
Name: KLINE, CAROLYN R
Address: 887 DEAN WAY
City-St-Zip: FORT MYERS, FL 33919

Title: VSD () Delete
Name: KLINE, EARL J
Address: 887 DEAN WAY
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CAROLYN KLINE

PRES

02/13/2006

Electronic Signature of Signing Officer or Director

Date