

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000127334 1. Entity Name FINDADDY'S, INC.	
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Principal Place of Business 935 NORTH BENEVA ROAD SUITE 601 SARASOTA, FL 34242	Mailing Address 2365 APPALOOSA CIRCLE SARASOTA, FL 34240
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DO NOT WRITE IN THIS SPACE



D1172006 No Chg-P CR2E034 (11/05)

4. FEI Number 46-0510221	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HENSON, DANIEL K 2365 APPALOOSA CIRCLE SARASOTA, FL 34240
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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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES HENSON, DANIEL 2365 APPALOOSA CIRCLE SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRANTON, JAVIER 4798 HAMLETS GROVE DRIVE SARASOTA, FL 34235
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01/30/06-20043-015 150.00

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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 title empowered.

SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	1/20/06 Date	Daytime Phone: _____
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