


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000127976		
1. Entity Name ISAAC F. AND JUANITA S. ALBRITTON MANAGEMENT, INC.		
Principal Place of Business NO. 3 ALBRITTON ROAD ALTURAS, FL 33820	Mailing Address P.O BOX 222 ALTURAS, FL 33820	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ALBRITTON, DALE E NO. 3 ALBRITTON ROAD ALTURAS, FL 33820		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and file 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		
TITLE	D	
NAME	ALBRITTON, DALE E	
STREET ADDRESS	NO. 3 ALBRITTON ROAD	
CITY - ST - ZIP	ALTURAS, FL 33820	
TITLE	D	
NAME	ALBRITTON, NICHOLAS F	
STREET ADDRESS	NO. 3 ALBRITTON ROAD	
CITY - ST - ZIP	ALTURAS, FL 33820	
TITLE	D	
NAME	SMOTHERS, SABRENA A	
STREET ADDRESS	1129 COLONY ARMS DRIVE	
CITY - ST - ZIP	LAKELAND, FL 33813	
TITLE	D	
NAME	BLACK, CHRISTENA A	
STREET ADDRESS	11158 CRESCENT BAY BOULEVARD	
CITY - ST - ZIP	CLERMONT, FL 34711	
TITLE	D	
NAME	MCGINNIS, LAURA A	
STREET ADDRESS	3461 BLACKJACK COURT	
CITY - ST - ZIP	LAKE WALES, FL 33853	
TITLE	D	
NAME	ALBRITTON, JERRERSON D	
STREET ADDRESS	NO. 3 ALBRITTON ROAD	
CITY - ST - ZIP	ALTURAS, FL 33820	
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: <i>Nicholas F Albritton</i> V. Pres 4/26/06 863-537-1343 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		



04262006 No Chg-P CR2E034 (11/05)

4. FEI Number 04-3736757	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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05/17/06-80131-004 150.00

**DO NOT WRITE
IN THIS SPACE**