

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000128536

Entity Name: CDT OF PENSACOLA, INC.

FILED
Mar 08, 2006
Secretary of State

Current Principal Place of Business:

7465 OLD PALAFOX
PENSACOLA, FL 32524

New Principal Place of Business:

450 VAN PELT LANE
PENSACOLA, FL 32505

Current Mailing Address:

7465 OLD PALAFOX
PENSACOLA, FL 32524

New Mailing Address:

450 VAN PELT LANE
PENSACOLA, FL 32505

FEI Number: 27-0041797

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEMING, EDWARD P
4300 BAYOU BLVD., STE. 13
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

PATRONI, CLYDE J
5 SABINE DRIVE
PENSACOLA BEACH, FL 32561 US

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: CLYDE J. PATRONI

03/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PATRONI, CLYDE J
Address: 5 SABINE DRIVE
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: S () Delete
Name: MOORE, DONALD W
Address: 3337 HARVEY LANE
City-St-Zip: PACE, FL 32571

Title: V () Delete
Name: ALSTINE, TIM V
Address: 5704 NICKLADS LANE
City-St-Zip: MILTON, FL 32570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: CLYDE J. PATRONI

P

03/08/2006

Electronic Signature of Signing Officer or Director

Date