

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90237 012 ***150.00

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1. Entity Name

CORBETT FINANCIAL SERVICES, INC.



Principal Place of Business

**11318 BLUE SAGE PLACE
BRADENTON, FL 34202**

Mailing Address

**11318 BLUE SAGE PLACE
BRADENTON, FL 34202**

DO NOT WRITE IN THIS SPACE



01062006

No Chg-P

CR2E034 (11/05)

4. FEI Number

02-0663058

Applied For

Not Applied

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORBETT, STANLEY H
11318 BLUE SAGE PLACE
BRADENTON, FL 34202**

**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 acknowledge the obligations of registered agent.

SIGNATURE

Stanley H. Corbett

STANLEY H. CORBETT

PRES

1-06-2006

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TREA
CORBETT, STANLEY H TREA
11318 BLUE SAGE PLACE
BRADENTON, FL 34202**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRES
CORBETT, STANLEY H PRES
11318 BLUE SAGE PLACE
BRADENTON, FL 34202**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V.P.
CORBETT, CASEY C V.P.
11318 BLUE SAGE PLACE
BRADENTON, FL 34202**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SEC
CORBETT, CASEY C SEC
11318 BLUE SAGE PLACE
BRADENTON, FL 34202**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.