

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 03, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000022012**

1. Entity Name  
**GRAPHIC LITHO RESOURCES, INC.**



Principal Place of Business

**15122 CRAGGY CLIFF ST  
TAMPA, FL 33625**

Mailing Address

**15122 CRAGGY CLIFF ST  
TAMPA, FL 33625**



01302006 No Chg-P CR2E034 (11/05)

4. FEI Number

**55-0820280**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**BUSSEY, REGINA  
15122 CRAGGY CLIFF ST  
TAMPA, FL 33625**

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

**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

DP

BUSSEY, REGINA

15122 CRAGGY CLIFF ST

TAMPA, FL 33625

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DV

BUSSEY, RICHARD

15122 CRAGGY CLIFF ST

TAMPA, FL 33625

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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:**

*Richard Bussey* **RICHARD BUSSEY**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-31-06 813-961-3036**

Date

Daytime Phone #

1100000417634  
02/13/06-80063-017 150.00