2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000030008

Entity Name: ANKEY SOLUTIONS, INC.

FILED Apr 23, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

278 SW PHEASANT WAY 1161 SUMMIT PLACE CIRCLE LAKE CITY, FL 32024

APT. C

WEST PALM BEACH, FL 33415

Current Mailing Address: New Mailing Address:

278 SW PHEASANT WAY 1161 SUMMIT PLACE CIRCLE LAKE CITY, FL 32024 APT. C

WEST PALM BEACH, FL 33415

FEI Number: 84-1624166 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

BATES, NICOLE BATES, NICOLE 1161 SÚMMIT PLACE CIRCLE 278 SW PHEASANT WAY LAKE CITY, FL 32024

WEST PALM BEACH, FL 33415 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: 04/23/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition PTSD () Delete Title: PTSD

BATES, NICOLE M Name: Name: BATES, NICOLE M

1161 SUMMIT PLACE CIRCLE, APT. C 278 SW PHEASANT WAY Address: Address: City-St-Zip: LAKE CITY, FL 32024 City-St-Zip: WEST PALM BEACH, FL 333415

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: NICOLE M. BATES **PTSD** 04/23/2006