2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000036397

Entity Name: MT THREE, INC.

FILED Aug 01, 2006 Secretary of State

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

971 MICHIGAN AVE. 7990 MAINLINE PARKWAY NAPLES, FL 34103 FORT MYERS, FL 33912

Current Mailing Address: New Mailing Address:

971 MICHIGAN AVE. POST OFFICE BOX 110066 NAPLES, FL 34103 PAPLES, FL 34108

FEI Number: 30-0193306 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BARTON, JERY E

971 MICHIGAN AVE.
NAPLES, FL 34103 US

LEE, CARLOS DAVID
7990 MAINLINE PARKWAY
FORT MYERS, FL 33912 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: CARLOS DAVID LEE 08/01/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

971 MICHIGAN AVE.

NAPLES, FL 34103

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Delete Title: SD (X) Change () Addition Name: EVANS, JAMES M Name: EVANS, JAMES M Address: 971 MICHIGAN AVE. Address: 7990 MAINLINE PARKWAY

City-St-Zip: NAPLES, FL 34103 City-St-Zip: FORT MYERS, FL 33912

Title: Title: (X) Change () Addition () Delete Name: LEE, CARLOS DAVID Name: LEE, CARLOS DAVID 971 MICHIGAN AVE. 7990 MAINLINE PARKWAY Address: Address: NAPLES, FL 34103 FORT MYERS, FL 33912 City-St-Zip: City-St-Zip:

Title: PD () Delete Title: PD (X) Change () Addition Name: MOORE, CHAD E Name: MOORE, CHAD E

Address: 971 MICHIGAN AVE. Address: 7990 MAINLINE PARKWAY
City-St-Zip: NAPLES, FL 34103 City-St-Zip: FORT MYERS, FL 33912

Title: VD (X) Delete Title: () Change () Addition Name: EVANS, JON C Name:

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: CARLOS DAVID LEE TD 08/01/2006