

FILED
Mar 31, 2006 8:00 am
Secretary of State

03-16-2006 90229 001 ***150.00

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000037978		
1. Entity Name SPD II, INC.		
Principal Place of Business 2800 N. MILITARY TRAIL SUITE 101 WEST PALM BEACH, FL 33409		Mailing Address 2800 N. MILITARY TRAIL SUITE 101 WEST PALM BEACH, FL 33409
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MENAPACE, BERNIE 2800 N. MILITARY TRAIL SUITE 101 WEST PALM BEACH, FL 33409		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 accept the obligations of registered agent. SIGNATURE: <u>Bernie Menapace Jr.</u> <u>Bernie Menapace Jr.</u> <u>3/5/06</u> Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature Required when registering)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$650.00		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	D MENAPACE, BERNIE 2800 N. MILITARY TRAIL #101 WEST PALM BEACH, FL 33409	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE	
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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: <u>Bernie Menapace</u> <u>Bernie Menapace</u> <u>3/27/06</u> <u>561-385-2422</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		

66007855



02012006 No Chg-P CR2E034 (11/05)

4. FEI Number
75-3109207

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required