## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000041365

City-St-Zip:

GAINESVILLE, FL 32605

Entity Name: ALACHUA COUNTY TODAY, INC.

FILED Apr 14, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	IN STREET A, FL 32615				
Current Mailing Address:			New Mailing Address:		
P.O. BOX ALACHUA	2135 A, FL 32616				
FEI Number	: 59-3682600	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	IN STREET	Js			
	e named entity si e of Florida.	ubmits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electroni	Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	BOUKARI, BRYA P.O. BOX 2135		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () BOUKARI, ELLE P.O. BOX 2135 ALACHUA, FL 3		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	T () I LUPARELLO, GA 3403 NW 8 AVEI		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: BRYAN BOUKARI P 04/14/2006