


FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90288 014 ***150.00

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P03000068732
 1. Entity Name
 ROBERT P. ANARUMO, P.A.



Principal Place of Business 245 GREELEY LOOP DAVENPORT, FL 33897 7370 Bent Grass Drive Winter Haven, FL 33884	Mailing Address 245 GREELEY LOOP DAVENPORT, FL 33897 7370 Bent Grass Drive Winter Haven, FL 33884
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04202006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0068470	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ANARUMO, ROBERT P
~~245 GREELEY LOOP DAVENPORT, FL 33897~~ 7370 Bent Grass Drive
 Winter Haven, FL 33884

**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: Robert P. Anarumo DATE: 4-27-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

**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	D ANARUMO, ROBERT P 245 GREELEY LOOP DAVENPORT, FL 33897 7370 Bent Grass Drive Winter Haven, FL 33884
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**DO NOT WRITE
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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: Robert P. Anarumo DATE: 4-27-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #