

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000083965

Entity Name: PRESHERS, INC.

FILED
Apr 13, 2006
Secretary of State

Current Principal Place of Business:

1349 OLD PONDELLA ROAD
NORTH FORT MYERS, FL 33903

New Principal Place of Business:

785 NE 19TH PLACE
UNIT B
CAPE CORAL, FL 33909

Current Mailing Address:

1349 OLD PONDELLA ROAD
NORTH FORT MYERS, FL 33903

New Mailing Address:

785 NE 19TH PLACE
UNIT B
CAPE CORAL, FL 33909

FEI Number: 01-0793765

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUCKELY, J. PATRICK
1633 S.E. 47TH TERRACE
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: PETERSON, LARRY
Address: 4421 SE 19TH PLACE
City-St-Zip: CAPE CORAL, FL 33904

Title: VTD () Delete
Name: PETERSON, LAURA D
Address: 4421 SE 19TH PLACE
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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: LARRY PETERSON

PSD

04/13/2006

Electronic Signature of Signing Officer or Director

Date