

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000084760

1. Entity Name
CDT ENTERPRISES, INC.



Principal Place of Business
**365 W SILVERTHORN LN
SAINT AUGUSTINE, FL 32095**

Mailing Address
**365 W SILVERTHORN LN
SAINT AUGUSTINE, FL 32095**



01162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
06-1703376

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**THOMAS, DAN J JR.
365 W SILVERTHORN LN
SAINT AUGUSTINE, FL 32095**

**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 *[Signature]* **DAN THOMAS JR**

(NOTE: Registered Agent signature required when reinstating)

1-17-06
DATE

**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
**PD
THOMAS, DAN J JR
365 W SILVERTHORN LN
SAINT AUGUSTINE, FL 32095**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
THOMAS, CAMELLIA J
365 W SILVERTHORN LN
SAINT AUGUSTINE, FL 32095**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000390234
01/23/06-80019-012 158.75

**DO NOT WRITE
IN THIS SPACE**

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:

[Signature] **DAN J THOMAS JR** (PRESIDENT)

1-17-06 9043430429
Date Daytime Phone #