

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000099776

FILED
Sep 28, 2006
Secretary of State

Entity Name: PENSACOLA RESEARCH CONSULTANTS, INC.

Current Principal Place of Business:

5700 N. DAVIS HWY
SUITE #4
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

5700 N. DAVIS HWY
SUITE #4
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 51-0481579 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAPOINTE, THEODORE E III
5700 N. DAVIS HWY
SUITE 4
PENSACOLA, FL 32503 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

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: PHILLIPS, DAVID E
Address: 5700 N. DAVIS HWY SUITE 4
City-St-Zip: PENSACOLA, FL 32503

Title: P () Delete
Name: LAPOINTE, THEODORE E III
Address: 5700 DAVIS HWY SUITE 4
City-St-Zip: PENSACOLA, FL 32503

Title: V () Delete
Name: POWELL, TONYA K
Address: 5700 N. DAVIS HWY SUITE 4
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change () Addition
Name: ELLIS, MICHAEL A
Address: 5700 N. DAVIS HWY SUITE 4
City-St-Zip: PENSACOLA, FL 32503

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: THEODORE E. LAPOINTE III

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09/28/2006

Electronic Signature of Signing Officer or Director

Date