## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000102686

Entity Name: TRIEBEL FAMILY ENTERPRISES, INC.

FILED Mar 21, 2006 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	E MORRIS B	LVD			
STE 503 PORT ORA	ANGE, FL 32 <sup>-</sup>	129			
Current Mailing Address:			New Mailing Addre	ss:	
4647 CLYE	E MORRIS B	I VD			
STE 503					
	ANGE, FL 32 <sup>-</sup>				
FEI Number:	20-0235875	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
150 MAGN	OLIA AVENU	SERVICES, INC. E 321152491 US			
The above in the State		submits this statement for the pu	rpose of changing its register	red office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	nic Signature of Registered Agen	t	Date	
Election Can	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	S ( TRIEBEL, COR 3111 QUEEN F EDGEWATER,	PALM DR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P ( TRIEBEL, DAW 1828 S CENTR FLAGLER BEA	AL AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V ( TRIEBEL, BRC 3036 WILLOW EDGEWATER,	OAK DR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( TRIEBEL, BRE 3627 B N LERO PEORIA, IL 61	ΣΥ	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T ( FERRARA, JAS 3036 WILLOW FDGFWATER	OAK DR	Title: Name: Address: City-St-Zin:	( ) 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.

SIGNATURE: BROOKE M. TRIEBEL V 03/21/2006