#### 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

### DOCUMENT # P03000115491

1. Entity Name R.D. HOWELL, INC.



Principal Place of Business

PALM BAY, FL 32905

2661 2ND AVENUE N.E.

Malling Address

2661 2ND AVENUE N.E. PALM BAY, FL 32905



**FILED** 

Apr 06, 2006 08:00 AM Secretary of State

## DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

Applied For 4. FEI Number 20-0353629 Not Applicable 

5. Certificate of Status Desired

03072008

\$8.75 Additional Fee Required

CR2E034 (11/05)

HOWELL, ROLAND D

# A NAT MOITE

No Chg-P

61 2ND AVENUE NLM BAY, FL 32905		IN THIS SPACE		
<ol><li>The above named entity submits this statement to the obligations of registered agent.</li></ol>	the purpose of changing its register	ed office or	agistered agent, or both,	in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or patrical name of regretated agent.	nd title if applicable. (NOTE, Registere	d Agent eignatut	a tequired when reinstating)	DATE
FiLE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.0	Stection Campaign Finar     Trust Fund Contribution.	rcing	\$5.00 May Be Added to Fees	
10. OFFICERS AND  TITLE P  NAME HOWELL, ROLAND D  STRILT ADDRESS CITY-ST-ZP PALM BAY, FL 32905  TITLE VP  NAME HOWELL, HARRIET M  STREET ADDRESS CITY-ST-ZP PALM BAY, FL 32905	DIRECTORS			U00000494326 04/20/06-80041-008 150.0
TITLE MANIE STRIET ADDRESS CATY-ST-ZIP TITLE MANIC STRIET ADDRESS		DO NOT WRITE IN THIS SPACE		

12. I hereby certify that the information supplied with this liting does not quality 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 path; that I am an officer or director of the corporation or the receiver or trustee expowered to execute this report as required by Chapter 507, Florida Statutes, and that my name appears in Block 10 or Block 11 if chapter 507 and an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET AUDRESS CITY-ST-ZIP TITLE NAME STREET AUDINESS CITY-ST-ZIP