


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90061 015 ***150.00

DOCUMENT # P03000118959

1. Entity Name
BOB BERNOTUS INC




Principal Place of Business Mailing Address
3223 N LOCKWOOD RIDGE RD, LOT 14A **3223 N LOCKWOOD RIDGE RD, LOT 14A**
SARASOTA, FL 34234 US **SARASOTA, FL 34234 US**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



01082006 Chg-P CR2E034 (11/05)

4. FEI Number Applied For

20-0336627 Not Applicable

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

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent

BERNOTUS, ROBERT Name
3223 N LOCKWOOD RIDGE RD, LOT 14A Street Address (P.O. Box Number is Not Acceptable)
SARASOTA, FL 34234 City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be
After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BERNOTUS, ROBERT 3223 N LOCKWOOD RIDGE RD, LOT 14A SARASOTA, FL 34234 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 empowerments.

SIGNATURE: *Robert J Bernotus* Date: *2-23-06* Daytime Phone #: *1-941-2667634*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **ROBERT J BERNOTUS**