2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # P03000128362

ROY GOODSON, INC.



FILED Mar 28, 2006 08:00 AM Secretary of State

Principal Place of Business

9428 OLD ST AUGUSTINE ROAD TALLAHASSEE, FL 32311

Mailing Address

9428 OLD ST AUGUSTINE ROAD TALLAHASSEE, FL 32311



03182006

No Chg-P

CR2E034 (11/05)

4. FEI Number 41-2116357 Applied Far Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOODSON, ROY 9428 OLD ST AUGUSTINE ROAD

DO NOT WRITE

TALLAHASSEE, FL 32311			IN THIS SPACE	
	named entity submits this statement for the patients of registered agent.	purpose of changing its registere	à office or registered agent, or bo	th, in the State of Florida. I am tamillar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	f applicable. (NOTE, Registered	Agent signature required when reinetating)	OA7E
FILE NOWIS FEE (\$ \$150.00)* After May 1, 2006 Fee Will be \$550.00		9. Election Campaign Finan- Trust Fund Contribution.	sing \$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		
NAME STREET ADDRESS CITY-ST-EP	PT GOODSON, ROY 9428 OLD ST AUGUSTINE ROAD TALLAHASSEE, FL 32311			
TITLE NAME STREET ADDRESS CHY-ST-ZIP				000000483650 04/12/06-80007-016 150.00
TITLE NAME STREET ADDRESS CSTY-ST-ZIP			DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
NAME STREET ADDRESS CITY-ST-ZIP				

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.



DILE NAME STREET ADDRESS

YFED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/06

Daylime Phone #