

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000142773

Entity Name: D. MATHENY, INC.

FILED  
May 01, 2006  
Secretary of State

## Current Principal Place of Business:

5381 ALLIGATOR LAKE ROAD  
ST. CLOUD, FL 34772

## New Principal Place of Business:

9251 CONCORD ROAD  
ST. CLOUD, FL 34773

## Current Mailing Address:

5381 ALLIGATOR LAKE ROAD  
ST. CLOUD, FL 34772

## New Mailing Address:

P.O. BOX 701791  
ST. CLOUD, FL 34770

FEI Number: 20-0441566

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MATHENY, SUZANNE Y  
5381 ALLIGATOR LAKE ROAD  
ST. CLOUD, FL 34772 US

## Name and Address of New Registered Agent:

MATHENY, SUZANNE Y  
9251 CONCORD ROAD  
ST. CLOUD, FL 34773 US

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: SUZANNE Y MATHENY

05/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution (X).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MATHENY, DEREK S  
Address: 5381 ALLIGATOR LAKE ROAD  
City-St-Zip: ST. CLOUD, FL 34772

Title: D ( ) Delete  
Name: MATHENY, SUZANNE Y  
Address: 5381 ALLIGATOR LAKE ROAD  
City-St-Zip: ST. CLOUD, FL 34772

Title: D ( ) Delete  
Name: MATHENY, BILLY S  
Address: 4899 ROBIN DRIVE  
City-St-Zip: ST. CLOUD, FL 34772

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MATHENY, DEREK S  
Address: 9251 CONCORD ROAD  
City-St-Zip: ST. CLOUD, FL 34773

Title: D (X) Change ( ) Addition  
Name: MATHENY, SUZANNE Y  
Address: 9251 CONCORD ROAD  
City-St-Zip: ST. CLOUD, FL 34773

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

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: SUZANNE Y MATHENY

D

05/01/2006

Electronic Signature of Signing Officer or Director

Date