

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000145706

Entity Name: ROBERT K, WRIGHT, INC.

FILED  
Mar 24, 2006  
Secretary of State

## Current Principal Place of Business:

214 MOON BEAM RD  
APOPKA, FL 32712

## New Principal Place of Business:

31150 INTERLACHEN DRIVE  
SORRENTO, FL 32776

## Current Mailing Address:

214 MOON BEAM RD  
APOPKA, FL 32712

## New Mailing Address:

31150 INTERLACHEN DRIVE  
SORRENTO, FL 32776

FEI Number: 05-0592591

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WRIGHT, ROBERT K  
214 MOON BEAM RD  
APOPKA, FL 32712 US

## Name and Address of New Registered Agent:

WRIGHT, ROBERT K  
31150 INTERLACHEN DRIVE  
SORRENTO, FL 32776 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: ROBERT WRIGHT

03/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: WRIGHT, ROBERT K  
Address: 214 MOON BEAM RD  
City-St-Zip: APOPKA, FL 32712

Title: VSD ( ) Delete  
Name: WRIGHT, DARLA E  
Address: 214 MOON BEAM RD  
City-St-Zip: APOPKA, FL 32712

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: WRIGHT, ROBERT K  
Address: 31150 INTERLACHEN DRIVE  
City-St-Zip: SORRENTO, FL 32776

Title: VSD (X) Change ( ) Addition  
Name: WRIGHT, DARLA E  
Address: 31150 INTERLACHEN DRIVE  
City-St-Zip: SORRENTO, FL 32776

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: ROBERT WRIGHT

PRES

03/24/2006

Electronic Signature of Signing Officer or Director

Date