

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000154502

**FILED**  
**Jan 16, 2006**  
**Secretary of State**

**Entity Name:** SAILFISH MANAGEMENT GROUP, INC.

**Current Principal Place of Business:**

108 S MAIN STREET  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

JP BPX 141314  
GAINESVILLE, FL 32614

**New Mailing Address:**

10620 S.W. 55TH PLACE  
GAINESVILLE, FL 32608

**FEI Number:** 86-1098003

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVIS, STEPHANIE  
108 S MAIN STREET  
GAINESVILLE, FL 32601 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SHARP, JOHN A  
Address: 9110 OSAGE VALLEY  
City-St-Zip: SAN ANTONIO, TX 78251

Title: V ( ) Delete  
Name: SHARP, JANET G  
Address: PO BOX 141314  
City-St-Zip: GAINESVILLE, FL 32614

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SHARP, JOHN A  
Address: 10620 S.W. 55TH PLACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: V (X) Change ( ) Addition  
Name: SHARP, JANET G  
Address: 10620 S.W. 55TH PLACE  
City-St-Zip: GAINESVILLE, FL 32608

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:** JOHN SHARP

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

OWNE

01/16/2006

\_\_\_\_\_  
Date