

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000158475

Entity Name: DARWIN VAUGHN INC.

FILED  
Aug 31, 2006  
Secretary of State

**Current Principal Place of Business:**

7200 US 1 SOUTH  
TITUSVILLE, FL 32780

**New Principal Place of Business:**

**Current Mailing Address:**

2770 DONNA DR  
TITUSVILLE, FL 32796

**New Mailing Address:**

FEI Number: 51-0492403      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

VAUGHN, DARWIN  
7200 US 1 SOUTH  
TITUSVILLE, FL 32780      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: PD ( ) Delete  
Name: VAUGHN, DARWIN  
Address: 2700 DONNA DR  
City-St-Zip: TITUSVILLE, FL 32796

Title: D ( ) Delete  
Name: VAUGHN, KEVIN L  
Address: 1549 LAFAYETTE AVE  
City-St-Zip: TITUSVILLE, FL 32796

Title: D ( ) Delete  
Name: VAUGHN, PATRICIA  
Address: 2770 DONNA DRIVE  
City-St-Zip: TITUSVILLE, FL 32796

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

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

Title: D (X) Change ( ) Addition  
Name: VAUGHN, KEVIN L  
Address: 1149 CAROL AVE  
City-St-Zip: TITUSVILLE, FL 32780

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: DARWIN L. VAUGHN

PD

08/31/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date