

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000000184

1. Entity Name
CARTER AMMONS, INC.



Principal Place of Business
4097 16TH AVE W
BRADENTON, FL 34205

Mailing Address
5218 6TH AVENUE DRIVE WEST
BRADENTON, FL 34209



04242006 No Chg-P CR2E034 (11/05)

4. FEI Number
26-0080183

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CARTER, BONNIE L
4097 16TH AVE W
BRADENTON, FL 34205

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|----------------|----------------------|
| TITLE | DVP |
| NAME | MORTON, HARLENE |
| STREET ADDRESS | 4097 16TH AVE W |
| CITY-ST-ZIP | BRADENTON, FL 34209 |
| TITLE | DP |
| NAME | CARTER, BONNIE |
| STREET ADDRESS | 4097 16TH AVE W |
| CITY-ST-ZIP | BRADENTON, FL 34205 |
| TITLE | DS |
| NAME | DURRANCE, ASHLEY E |
| STREET ADDRESS | 11097 16TH AVE. WEST |
| CITY-ST-ZIP | BRADENTON, FL 34205 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
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| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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**DO NOT WRITE
IN THIS SPACE**

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 507, 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.

SIGNATURE:

Bonnie L. Carter **BONNIE L. CARTER** (941)-724-00
4/26/06 Date Daytime Phone #