## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Mar 24, 2006 8:00 am Secretary of State 03-24-2006 90020 035 \*\*\*158.75

DOCUMENT # P  1. Entity Name THE TAB JACKSON GI		1			•	03-24-2006	90020 03	5 ***158	3.75
Principal Place of Business	Mai	iling Address			4003	7790			
19 WHISPERING PINES COURT SANTA ROSA, FL 32459		19 WHISPERING PINES COURT Santa Rosa, FL 32459			1	, ,			
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03182006	Chg-P	CR2E03	94 (11/05)	
City & State		City & State			4. FEI Number 20-05636	643			plied For a Applicable
ZipCou	ntry Z	ip _	Coun	try	5. Certificate of			8.75 Add	litional
6. Name and A	ddress of Current Registe	ered Agent	1		7. Name and A	ddress of New I			
				Name			<del></del>		
JACKSON, RICHARD T 19 WHISPERING PINES COURT SANTA ROSA, FL: 32459					(P.O. Box Number i	s Not Acceptab	le)	·-	
<b>₹</b>				— <del>2:</del>				T =:	
i				City			FL_	Zip Cod	e
						in the Ctate of Ci	lorida. Lam fa		
The above named entity subm the obligations of registered ag		urpose of changing its	s registere	ed office or register	red agent, or both,	in the State of Fi	ionoa. Tamie	amiliar with,	and accept
the obligations of registered ac				ed office or register		in the state of F	DATE	amiliar with,	and accept
the obligations of registered ac	name of registered agent and title if		re: Registered	d Agent signature required		in the State of Fi		amiliar with,	and accept
the obligations of registered as SIGNATURE Signature, typed or printed FILE NOW!!! FEE After May 1, 2006 Fee	name of registered agent and title if its \$150.00 will be \$550.00  OFFICERS AND DIRECT	applicable. (NOT  9. Election Campa  Trust Fund Con  TORS	FE: Registered aign Finar atribution.	d Agent signature required	d when reinstating)  5.00 May Be ded to Fees	HANGES TO OF	DATE	DIRECTOR	S IN 11
the obligations of registered as  SIGNATURE  Signature, typed or printed  FILE NOW!!! FEE After May 1, 2006 Fee  10.  TIILE  P NAME  JACKSON, RICE	pent.  IS \$150.00  WIS \$550.00  OFFICERS AND DIRECT  HARD T  3 PINES COURT	applicable. (NOT  9. Election Campa  Trust Fund Con	aign Finar tribution.	d Agent signature required	d when reinstating)  5.00 May Be ded to Fees		DATE		
the obligations of registered as SIGNATURE—Signature, typed or printed After May 1, 2006 Fee 10.  TILLE P JACKSON, RICK STREET ADDRESS 19 WHISPERING	pent.  IS \$150.00  WIS \$550.00  OFFICERS AND DIRECT  HARD T  3 PINES COURT	applicable. (NOT  9. Election Campa  Trust Fund Con  TORS	aign Finarattribution.  11. THE NAME STRECTY. THE NAME STRECTY.	d Agent signature required  Add  E  E  E  E  T ADDRESS  -ST - ZIP	d when reinstating)  5.00 May Be ded to Fees		DATE	DIRECTOR	S IN 11
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reported supplemental report is true and accurate and mait my signature shall have the same legal effect as it made under path; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.