


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2006 8:00 am
Secretary of State

01-26-2006 90029 005 ***150.00

DOCUMENT # P04000013042	
1. Entity Name A ACCREDITED ENTERPRISES INC.	

Principal Place of Business P.O. BOX 3253 BELLEVIEW, FL 34421	Mailing Address P.O. BOX 3253 BELLEVIEW, FL 34421
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DO NOT WRITE IN THIS SPACE



01062006 No Chg-P CR25034 (11/05)

4. FEI Number 20-0638869	Applied For <input checked="" type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent POSEY, SHIRLEY 13773 NORTH HWY 475 OXFORD, FL 34484

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>	DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP POSEY, LONNIE P.O. BOX 3253 BELLEVIEW, FL 34421
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P POSEY, SHIRLEY P.O. BOX 34421 OXFORD, FL 34421
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 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.	
SIGNATURE: <i>Shirley Posey</i> Shirley Posey President	Date: 1-18-06 Daytime Phone #: (352)330-0934