


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 02, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000015289 1. Entity Name THE MOTTER GROUP, INC.	
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Principal Place of Business 150 INDUSTRIAL PARK RD STE 15 DESTIN, FL 32541	Mailing Address 150 INDUSTRIAL PARK RD STE 15 DESTIN, FL 32541
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01232006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0646379	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WEIMORTS, MICHAEL L ESQUIRE MICHAEL L. WEIMORTS, P.A. 4507 FURLING LN STE 209 DESTIN, FL 32541
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**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 _____ (NOTE: Registered Agent signature required when re-registering) 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	D MOTTER, MARION 16 BAYOU POINT DR SANTA ROSA BCH, FL 32459
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOTTER, GLENDA 16 BAYOU POINT DR SANTA ROSA BCH, FL 32459
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03/14/06-80042-025 150.00

**DO NOT WRITE
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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: Marion R. Motter MARION R. MOTTER 1/23/06 850-428-1443
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #