2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000017547

Entity Name: SPENCER B. EMMONS, P.A.

FILED Jan 09, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5167 SUNNYBROOK CT 5327 NAUTILUS DR

CAPE CORAL, FL 33904 US US CAPE CORAL, FL 33904

Current Mailing Address: New Mailing Address:

5167 SUNNYBROOK CT 5327 NAUTILUS DR

CAPE CORAL, FL 33904 US CAPE CORAL, FL 33904 US

FEI Number: 20-0669375 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

EMMONS, SPENCER B EMMONS, SPENCER B 5167 SUNNYBROOK CT 5327 NAUTILUS DR

US CAPE CORAL, FL 33904 US CAPE CORAL, FL 33904

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: SPENCER EMMONS 01/09/2006

> Electronic Signature of Registered Agent Date

> > Address:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition EMMONS, SPENCER B EMMONS, SPENCER B Name: Name:

5167 SUNNYBROOK CT 5327 NAUTILUS DR Address: City-St-Zip: CAPE CORAL, FL 33904 US City-St-Zip: CAPE CORAL, FL 33904 US

() Delete VΡ Title: VΡ Title: (X) Change () Addition

EMMONS, SPENCER B Name: EMMONS, SPENCER B Name: 5167 SUNNYBROOK CT 5327 NAUTILUS DR Address: Address: CAPE CORAL, FL 33904 US CAPE CORAL, FL 33904 US City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition SEC () Delete SEC

EMMONS, SPENCER B EMMONS, SPENCER B Name: Name:

5167 SUNNYBROOK CT 5327 NAUTILUS DR Address: Address:

CAPE CORAL, FL FLORIDA US City-St-Zip: CAPE CORAL, FL FLORIDA US City-St-Zip:

Title: TRE () Delete Title: (X) Change () Addition

EMMONS, SPENCER B EMMONS, SPENCER B Name: Name: Address: 5167 SUNNYBROOK CT Address: 5327 NAUTILUS DR

City-St-Zip: City-St-Zip: CAPE CORAL, FL FLORIDA US CAPE CORAL, FL FLORIDA US

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.

VΡ SIGNATURE: SPENCER EMMONS 01/09/2006