

2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # P04000039534

1. Entity Name
 THE PET NANNY OF THE SUNCOAST, INC.



Principal Place of Business
 9206 WOODMEADOW LOOP
 BRADENTON, FL 34202

Mailing Address
 9206 WOODMEADOW LOOP
 BRADENTON, FL 34202



03292006 No Chg-P CR2E034 (11/05)

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4. FEI Number
 20-0830319

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

SNYDER, DONALD H JR.
 5603 26TH STREET WEST
 BRADENTON, FL 34207

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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 _____ DATE _____
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

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

1000000550651
 05/13/06-80068-016 150.00

10. OFFICERS AND DIRECTORS

TITLE: PRES
 NAME: DOINIDIS, DEBORAH A
 STREET ADDRESS: 9206 WOODMEADOW LOOP
 CITY-ST-ZIP: BRADENTON, FL 34202

TITLE: VP
 NAME: DOINIDIS, DEBORAH A
 STREET ADDRESS: 9206 WOODMEADOW LOOP
 CITY-ST-ZIP: BRADENTON, FL 34202

TITLE: SEC
 NAME: DOINIDIS, DEBORAH A
 STREET ADDRESS: 9206 WOODMEADOW LOOP
 CITY-ST-ZIP: BRADENTON, FL 34202

TITLE: TREA
 NAME: DOINIDIS, DEBORAH A
 STREET ADDRESS: 9206 WOODMEADOW LOOP
 CITY-ST-ZIP: BRADENTON, FL 34202

TITLE: _____
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

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: Deborah Doinidis Date: 4/26/06 Daytime Phone #: (941) 739-8570
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR