## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

	AITITAN IN V	123		Mar 13, 2006 08:00 AN
1. Entity Nan	MENT # P04000046992	-		Secretary of State
Principal Plac	e of Business Mailing Addr			
( '	ERMAN'S RUN 216 E. FISH	HERMAN'S RUN FL 32439		
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{	esta esta esta de la desta de la Maria de Maria.			03082006 No Chg-P CR2E034 (11/05)
}	WALL IN TH	115 SPA	UE	4. FEI Number Applied For
}				16-1615468   Not Applicable
}				5. Certificate of Status Desired
6. Name and Address of Current Registered Agent				
	RONALD E HERMAN'S RUN			ON NOT WRITE
FREEPOR	RT, FL 32439	•	}	ME 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.				
3/28/01				
SIGNATURE Sgnature, typed or printed name of registered agent and tide if applicable (ROTE Registered Agent signature required when reinstating) DATE				
FILE NOWILL FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.				
16.	OFFICERS AND DIRECTORS		I	
TITLE NAME	D BOGERS BONNING		ŀ	
STREET ADDRESS	ROGERS, RONALD E 216 E. FISHERMAN'S RUN		f	
CITY-ST-ZIP	FREEPORT, FL 32439			
TITLE				
NAME STREET ADDRESS			į	1100000465542
CITY-ST-ZIP			1	03/22/06-80039-024 150.70
TYTLE			l	
NAME	١			
STREET ADDRESS CITY-ST-ZIP				- NOT WRITE
TITLE			1	
NAME				HE THIS SPACE
STREET ADDRESS			}	
TITLE				
NAME				
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City-st-zip				
TITLE NAME				
STREET ADDRESS				
CITY-ST-ZIP				
12. I hereby o	ertily that the information supplied with this filling does not this report or supplied manufacture.	ot qualify for the exe	mptions contained	in Chapter 119, Florida Statutes. I further certify that the information
12. Thereby 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 cash, 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 it changed, or on an attachment with an address, with all other like empowered.				

**FILED** 

3/8/06 8508358499