

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000049224

Entity Name: ROSAIRE R BADGER PA

FILED  
Apr 30, 2006  
Secretary of State

## Current Principal Place of Business:

1675 RIPLEY RUN  
WELLINGTON, FL 33414

## New Principal Place of Business:

208 N PARROTT AVE  
OKEECHOBEE, FL 34972

## Current Mailing Address:

P O BOX 2865  
PALM BEACH, FL 33480

## New Mailing Address:

P O BOX 2977  
OKEECHOBEE, FL 33473

FEI Number: 03-0538542

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BADGER, ROSAIRE R  
1675 RIPLEY RUN  
WELLINGTON, FL 33414 US

## Name and Address of New Registered Agent:

BADGER, ROSAIRE R  
208 N PARROTT AVE  
OKEECHOBEE, FL 33472 US

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: ROSAIRE R. BADGER

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/ST ( ) Delete  
Name: BADGER, ROSAIRE R  
Address: P O BOX 2865  
City-St-Zip: PALM BEACH, FL 33480

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/ST (X) Change ( ) Addition  
Name: BADGER, ROSAIRE R  
Address: P O BOX 2977  
City-St-Zip: OKEECHOBEE, FL 33473

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.

SIGNATURE: ROSAIRE R. BADGER

PS/T

04/30/2006

Electronic Signature of Signing Officer or Director

Date