## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000055077

Entity Name: SWEET DARLIN 2 INC

**FILED** Aug 31, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

13820 ST. AUGUSTINE RD., STE. 113 13820 OLD ST AUGUSTINE RD JACKSONVILLE, FL 32258

SUITE 113

JACKSONVILLE, FL 32258

**Current Mailing Address:** New Mailing Address:

13820 ST. AUGUSTINE RD., STE. 113 13820 OLD ST AUGUSTINE RD

JACKSONVILLE, FL 32258 SUITE 113 US

JACKSONVILLE, FL 32258

FEI Number: 20-0939829 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:

RAY, T RAY, TA

13820 ST. AUGUSTINE RD. 13820 ST. AUGUSTINE RD.

STE. 113 STE. 113 JACKSONVILLE, FL 32258 US JACKSONVILLE, FL 32258 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: TARAY 08/31/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete () Change () Addition

CARTER, DARLEEN L Name: Name: 10773 SADDLEBRED DR Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 US City-St-Zip:

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

Name: RAY, G.J. Name: 13820 ST AUGUSTINE RD #113 Address: Address: JACKSONVILLE, FL 32258 City-St-Zip: City-St-Zip:

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

RAY, TRESSA Name: RAY, TA Name:

13820 ST AUGUSTINE RD #113 13820 ST AUGUSTINE RD #113 Address Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: JACKSONVILLE, FL 32258

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: TARAY 08/31/2006