2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 06, 2006 08:00 AM **Secretary of State DOCUMENT # P04000064316** POLITICAL RESEARCH, INC. Principal Place of Business Mailing Address 1008 SIERRA BLANCA CT 1008 SIERRA BLANCA CT LADY LAKE, FL 32159 LADY LAKE, FL 32159 01062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1150057 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TRENKLE, JOHN J DO NOT WRITE 1008 SIERRA BLANCA CT LADY LAKE, FL 32159 IN 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. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME TRENKLE, JOHN J STREET ADDRESS 1008 SIERRA BLANCA CT CHY-ST-ZIP LADY LAKE, FL 32159 TOTALE NAME STREET ADDRESS 1000000456796 CITY-ST-ZIP 93/16/06 B0043 023 150.00 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-IN TITLE IN THIS SPACE NAME STREET ADDRESS City-St-zip

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. Uturther 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 it made under oath; that I am an officer or director of the corporation or the preciver of trustee emprovered 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 attachingly that an address with all of the like empowered.

SIGNATURE:

DAME STREET ADDRESS CITY-ST-ZIP BILE NAME STREET ADDRESS

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