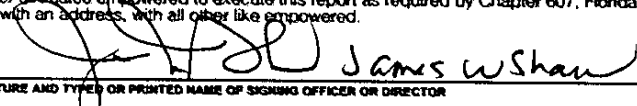


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006 8:00 am
Secretary of State

01-25-2006 90033 026 ***150.00

DOCUMENT # P04000070902					
1. Entity Name 441 MANAGEMENT, INC.					
Principal Place of Business 14420 NW 151ST BLVD ALACHUA, FL 32615			Mailing Address P.O. BOX 1990 ALACHUA, FL 32616		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 55-0868440	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
TOMPKINS, DARRYL J 14420 NW 151ST BLVD ALACHUA, FL 32615			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when renewing.) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SHAW, JAMES W ☐ Delete 14420 NW 151ST BLVD ALACHUA, FL 32615				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD TOMPKINS, DARRYL J ☐ Delete 14420 NW 151ST BLVD ALACHUA, FL 32615				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD HAWLEY, PHILLIP L ☐ Delete 14420 NW 151ST BLVD ALACHUA, FL 32615				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD WIGGINS, J. ARDENE ☐ Delete 14420 NW 151ST BLVD ALACHUA, FL 32615				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition 13505 NW 8th Pl Alachua FL 32615				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition 300 SW 143rd St Jonesville FL 32669				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition 14016 MLK Hwy Alachua FL 32615				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition				
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:  James W Shaw 1/26/06 352-665-8170					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					