## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

## Feb 24, 2006 08:00 AM **Secretary of State DOCUMENT # P04000073249** RONALD J. CURR, P.A. left of STATE Principal Place of Business Malling Address 4935 SW 8 CT 4935 SW 8 CT CAPE CORAL, FL 33914 CAPE CORAL, FL 33914 01162006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 37-1489988 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent CURR, RONALD J DO NOT WRITE 4935 SW 8 CT CAPE CORAL, FL 33914 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. Signature, typed or printed name of registered egent end title if applicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 } After May 1, 2006 Fee WIL be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. DP TITLE NAME CURR, RONALD J 4935 SW 8 CT STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33914 0000000447119 03/08/06-80038-011 150.00 NAME STREET ADDRESS CITY-ST-ZIP T)7t F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THILE STREET ADDRESS

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 likes impowered.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED