## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 14, 2006 08:00 AN
Secretary of State

DOCUMENT # P04  1. Entity Name DAVID S. GODNICK, INC	•	
Principal Place of Business 2031 NE 14TH CT FORT LAUDERDALE, FL 33304	Mailing Address 2031 NE 14TH CT US FORT LAUDERDALE, FL 33304	us
		· · · · · ·

SIGNATURE: 4

DO NOT WRITE IN THIS SPACE			05092006 No Chg-P CR2E034 (11/05)  4. FEI Number Applied For Not Applicable					
	6. Name and Address of Current Regis	tered Agent		. •	· ·			
GODNICK 2031 NE 1 FORT LAU				'	NOT WI			
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.								
SIGNAŢURE	Signature, typed or printed name of registered agent and little	if applicable (NOTE Registered	Agent signature required	when reinstating)		DATE		
,	Tarritta eks. Todakad Or syktomik	Election Campaign Finan     Trust Fund Contribution.		.00 May Be ed to Fees				
10.	OFFICERS AND DIRE	CTORS		•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GODNICK, DAVID S 2031 NE 14TH CT FORT LAUDERDALE, FL 33304				· · · · · · · · · · · · · · · · · · ·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·				U000001 06/14/06-1	567189 80001-018 ,	150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	,		IN.	THIS SP	ACE		
NAME STREET ADDRESS CITY-SY-ZIP		;	. ,	. i	,			
TITLE NAME STREET ADDRESS CITY - ST - ZIP				•		•		
12. I hereby of indicated of the corchanged,	certify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empowere or on an attachment with an address, with a	iling does not qualify for the exe and accurate and that my signat d to execute this report as requi Il other like empowered.	emptions contained ure shall have the red by Chapter 607	d in Chapter 119 same legal effec 7, Florida Statute	9, Florida Statutes. I ct as if made under o es; and that my name	further certify that ath; that I am an o appears in Block	the information fficer or director 10 or Block 11 if	