

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000093050 1. Entity Name JOYCE A. PYBUS, P.A.	
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Principal Place of Business 105 BROOKS STREET #6 FORT WALTON BEACH, FL 32548 US	Mailing Address P. O. BOX 6237 MIRAMAR BEACH, FL 32550 US
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DO NOT WRITE IN THIS SPACE

FILED
06 SEP 21 AM 10:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



08182006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1257115	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PYBUS, JOYCE A
105 BROOKS STREET
#6
FORT WALTON BEACH, FL 32548

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 agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

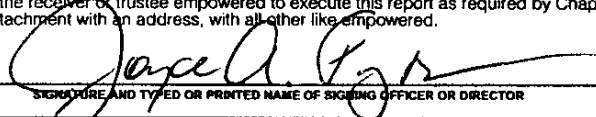
600080195276
09/26/06--01075--036 **150.00
DATE

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D PYBUS, JOYCE A 105 BROOKS STREET #6 FORT WALTON BEACH, FL 32548
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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:  **9/19/06**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

DO NOT WRITE IN THIS SPACE

K. Eckel SEP 22 2006