


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 16, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P04000105040**

1. Entity Name  
**BILLPEN CORP.**



Principal Place of Business <b>3180 SW 88TH ST - STE 211          SUITE 211          OCALA, FL 34476</b>	Mailing Address <b>3180 SW 88TH ST          SUITE 211          OCALA, FL 34476</b>
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01082006 No Chg-P CRZE034 (11/05)

4. FEI Number <b>88-0463965</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

**SONTOS, BILL  
 3180 SW 88TH ST  
 SUITE 211  
 OCALA, FL 34476**

**DO NOT WRITE 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retaking)

**FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P SONTOS, BILL 3180 SW 88TH ST - STE 211 OCALA, FL 34476</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST SONTOS, PENNY 3180 SW 88TH ST - STE 211 OCALA, FL 34476</b>
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**DO NOT WRITE IN THIS SPACE**

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 02/28/06-80012-009 150.00

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: *Bill Sontos* **1-10-06** Date Daytime Phone #

**352 854 2846**