2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2006 8:00 am Secretary of State 04-17-2006 90404 046 ***150.00

DOCUMENT # P04000118678 1. Entity Name PECHMANN PROPERTIES, INC.									
Principal Place of Business 51 EDITH POPE DR PALM COAST, FL 32164			Mailing Address 51 EDITH POPE DR PALM COAST, FL 32164					500124	29
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04062006	Chg-P	CR2E034 (11/05)	
City & State		City & State			4. FEI Number 20-1530		<u>-</u>	Applied For Not Applicable	
Zip	Zip Country		Zip	p Country		5. Certificate of	of Status Desired	\$8.75 Ac	
	6. Name	and Address of Current	Registered Agent		Name	7. Name and	Address of New R	Registered Agent	
INTERNOISCIA, DAVID J 3149 PONCE DE LEON BLVD ST AUGUSTINE. FL 32084					12/2	EGG P	ECHMA		
							r is Not Acceptable		
01710001	J. 1712, 1 2	02004			S/ED	ITH P	OPE DA	iVE	
					City DAL	M COA	ST	FL Zinco	de 1617
8. The above	named entity	submits this statement to	or the purpose of changing i	s register	ed office or registe	ered agent, or both	n, in the State of Flo	orida. Lam familiar with	, and accept
the obligations of registred agent.									
SIGNATURE.	Signature, typed	or printed name of registered agent	and little if applicable. (110	ITE: Registere	ed Agent signature require	ed when reinstating)		DME	
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign F Trust Fund Contribute					noina &				•
After Ma		3 Fee will be \$550.	OO Trust Fund Co.	_	· _ •	5.00 May Be ded to Fees			
After Ma	aÿ 1, 200€		OD Trust Fund Co.	ntribution.	☐ Ād	ded to Fees	CHANGES TO OFF	FICERS AND DIRECTO	
After Ma	aÿ 1, 2006	3 Fee will be \$550.	OO Trust Fund Co.	ntribution.	£ Ad	ded to Fees	CHANGES TO OFF	FICERS AND DIRECTO	RS IN 11
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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 for 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. GREGO RECHMANN 4

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR