


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED  
Mar 09, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # P04000122529</b> Entity Name <b>NAVARRE SOLUTIONS, INC.</b>	
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Principal Place of Business <b>1942 HIGHWAY 87 SOUTH NAVARRE, FL 32566</b>	Mailing Address <b>1942 HIGHWAY 87 SOUTH NAVARRE, FL 32566</b>
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**DO NOT WRITE IN THIS SPACE**



01312006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>20-1692312</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**WHITE, DAVID G ESQ.  
204 CHURCH STREET EAST  
PENSACOLA, FL 32502**

**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 reinstating)

**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	PD PULLUM, JEANNE 2845 PEBBLE BEACH DRIVE NAVARRE, FL 32566
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE IN THIS SPACE**

180000461615  
03/21/06-80002-017 150.00

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: *Jeanne Pullum, President* 3/3/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

Jeanne Pullum, President