## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 27, 2006 08:00 AN Secretary of State **DOCUMENT # P04000154718** DID NOT, DID TOO, INC. Principal Place of Business Mailing Address **403 ORANGE STREET 403 ORANGE STREET** PALM HARBOR, FL 34683 PALM HARBOR, FL 34683 No Chg-P CR2E034 (11/05) 02212006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1878035 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BUNCH, STEVE DO NOT WRITE **603 FOREST GLEN RD** CLEARWATER, FL 33765 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, typed or printed name of registered agent and litle if applicable (NOTE. Registered Agent signature required when reinstating) DATE \$5.00 May Be Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 11000000448887 <del>03/03/06-80031-014 150.00</del> 10. OFFICERS AND DIRECTORS TITLE BUNCH, STEVE NAME STREET ADDRESS **403 ORANGE STREET** CITY-ST-ZIP PALM HARBOR, FL 34683 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP MANAGE STREET ADDRESS

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 cath; 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:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

2/21/06 (727) 7721912
Date Date Descriptions

**FILED**