

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 19, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000164911

Entity Name

LIST ENTERPRISES, INC.



Principal Place of Business

5200 SE STERLING CIR
STUART, FL 34997

Mailing Address

5200 SE STERLING CIR
STUART, FL 34997



04122006

No Chg-P

CR2E034 (11/05)

4. FEI Number
26-0102010

Applied For
Not Applied

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SCOTT, PORTIA B
921 SE CENTRAL PKWY
STUART, FL 34994

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

Signature, typed or printed name of registered agent and title (if applicable).

(NOTE: Registered Agent signature required when resigning)

000000519317
05/02/06 80049-014 150.00

DATE

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 D
NAME GRAFF, LISA
STREET ADDRESS 5200 SE STERLING CIR
CITY-ST-ZIP STUART, FL 34997

TITLE D
NAME GRAFF, STEVEN
STREET ADDRESS 5200 SE STERLING CIR
CITY-ST-ZIP STUART, FL 34997

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE
IN THIS SPACE

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-2006

DATE

772-834-9358

Daytime Phone #