2006 FOR PROFIT CORPORATION

ANNUAL REPORT

FILED Jul 10, 2006 8:00 am Secretary of State 3/2

1. Entity Nam	MENT # P050000003 N MANAGEMENT CORP.			03-27-20	JUO 90200 001	130.00		
Principal Place	e of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·	_	~ 0	004400		
1232 SW KNOLLWOOD DRIVE 1232 SW KNOLLW PALM CITY, FL 34990 PALM CITY, FL 34		1232 SW KNOLLWOOD (PALM CITY, FL 34990	ORIVE	,.	66	021480		
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2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03032006	Chg-P	CR2E034 (11/05)	
City & State		City & State		4. FEI Numb	-716 3ª	4112 H	opplied For	
ΖΊρ	Country	Zip	Country	5. Certificate	of Status Desired	\$8.75 A	lot Applicable Iditional ad	
	6. Name and Address of Current R	egistered Agent		7. Name and	Address of New R			
SANTORO, BRENDA			Name	Name				
1440 COR	AL RIDGE DRIVE, STE. 113 PRINGS, FL 33071		Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
			ţ					
			City		····	FL Zip Co	de	
The above named entity submits this statement for the purpose of changing its registered.				istered agent, or bo	th, in the State of Fk	orlda. I am familiar with	, and accept	
the congar	ions of registered agent.							
SIGNATURE.	Signature, typed or printed name of registered agent an	Registered Agent eigneture rec	Shred when teurisand)		DATE	<u> </u>		
)	· • • •		-					
	E NOW!!! FEE 18 \$150.00 by 1, 2006 Fee will be \$550.00	9. Election Campaig Trust Fund Contrib	· -	\$5.00 May Be Added to Fees				
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10.		IDECTORS	E 44	ADDITIONS	CHANGES TO OFF	ACCOR AND DIRECTOR	20 31 44	
10.	OFFICERS AND D	IRECTORS Delete	11.	ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTO		
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TITLE	OFFICERS AND D		TITLE	ADDITIONS	CHANGES TO OFF			
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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. Hurther certify that the information indicated on this report or suppliemental 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 attackprent with an address. With all other like empowered.

SIGNATURE:

SUS AN MERZON SUS AN MERZON SIGNATURE AND TYPED OR PROTECTION OF PRINTED HAVE OF SIGNING OFFICER OR DIRECTOR

172-221-0140