


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 20, 2006 8:00 am**  
**Secretary of State**

04-20-2006 90172 008 \*\*\*150.00

<b>DOCUMENT # P05000027334</b>															
<b>1. Entity Name</b> GOING BROKE, INC.															
<b>Principal Place of Business</b> 2469 WEST HWY 90 LAKE CITY, FL 32055			<b>Mailing Address</b> P. O. BOX 4417 DOWLING PARK, FL 32064												
<b>2. Principal Place of Business</b> 13422 225 TH RD		<b>3. Mailing Address</b>													
Suite, Apt. #, etc.		Suite, Apt. #, etc.													
<b>City &amp; State</b> LIVE OAK, FL		<b>City &amp; State</b>													
<b>Zip</b> 32060	<b>Country</b> U.S.A.	<b>Zip</b>	<b>Country</b>												
<b>6. Name and Address of Current Registered Agent</b>  PEACOCK, RONALD H 206 S. MARION AVE. LAKE CITY, FL 32056			<b>7. Name and Address of New Registered Agent</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 2px;"> <b>Name</b>                  GEORGE E. WILSON             </td> </tr> <tr> <td colspan="2" style="padding: 2px;"> <b>Street Address (P.O. Box Number is Not Acceptable)</b> </td> </tr> <tr> <td colspan="2" style="padding: 2px;">                 13422 225 TH RD             </td> </tr> <tr> <td style="padding: 2px;"> <b>City</b>                  LIVE OAK             </td> <td style="padding: 2px;"> <b>FL</b> </td> </tr> <tr> <td colspan="2" style="padding: 2px;"> <b>Zip Code</b>                  32060             </td> </tr> </table>			<b>Name</b> GEORGE E. WILSON		<b>Street Address (P.O. Box Number is Not Acceptable)</b>		13422 225 TH RD		<b>City</b> LIVE OAK	<b>FL</b>	<b>Zip Code</b> 32060	
<b>Name</b> GEORGE E. WILSON															
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13422 225 TH RD															
<b>City</b> LIVE OAK	<b>FL</b>														
<b>Zip Code</b> 32060															
<b>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.</b>															
<table style="width:100%;"> <tr> <td style="width:60%;"> <b>SIGNATURE</b> <u>George E. Wilson</u> <u>GEORGE E. WILSON</u> <u>PRESIDENT</u> </td> <td style="width:40%;"> <b>DATE</b> <u>17 APR 06</u> </td> </tr> <tr> <td colspan="2" style="font-size: small;">                     Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)                 </td> </tr> </table>						<b>SIGNATURE</b> <u>George E. Wilson</u> <u>GEORGE E. WILSON</u> <u>PRESIDENT</u>	<b>DATE</b> <u>17 APR 06</u>	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)							
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<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees													
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>												
<b>TITLE</b> P	<b>NAME</b> WILSON, GEORGE		<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition										
<b>STREET ADDRESS</b> P. O. BOX 4416	<b>CITY-ST-ZIP</b> DOWLING PARK, FL 32064			<b>NAME</b>	<b>STREET ADDRESS</b>										
<b>CITY-ST-ZIP</b>	DOWLING PARK, FL 32064			<b>CITY-ST-ZIP</b>	DOWLING PARK, FL 32064										
<b>TITLE</b> SEC	<b>NAME</b> WILSON, GEORGE		<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition										
<b>STREET ADDRESS</b> P. O. BOX 4417	<b>CITY-ST-ZIP</b> DOWLING PARK, FL 32064			<b>NAME</b>	<b>STREET ADDRESS</b>										
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<b>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.</b>															
<b>SIGNATURE:</b> <u>George E. Wilson</u> <u>GEORGE E. WILSON</u> <u>17 APR 06</u> <u>386-658-3970</u>															
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR															