

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000046939

FILED
Apr 19, 2006
Secretary of State

Entity Name: ZAKHARY - SIMS CORPORATION

Current Principal Place of Business:

P.O. BOX 1269
OKEECHOBEE, FL 34973 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1269
OKEECHOBEE, FL 34973 US

New Mailing Address:

PO BOX 1269
OKEECHOBEE, FL 34973 US

FEI Number: 20-2666816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMS, LAURA K
223 S. PARROTT AVENUE
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

SIMS, LAURA K
223 S PARROTT AVENUE
OKEECHOBEE, FL 34974 US

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.

SIGNATURE: LAURA K SIMS

04/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SIMS, BEN C
Address: 5001 SE 43RD TRACE
City-St-Zip: OKEECHOBEE, FL 34974 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD () Change (X) Addition
Name: ZAKHARY, PETER
Address: 314 E PLANT STREET
City-St-Zip: WINTER GARDEN, FL 34787

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BEN C SIMS

PD

04/19/2006

Electronic Signature of Signing Officer or Director

Date