

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 25, 2006 8:00 am**  
**Secretary of State**

01-25-2006 90025 041 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                    |                                                                                                                           |                                                           |                                                                                                                                                                             |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # P05000051228</b><br>1. Entity Name<br><b>FINNEL ENTERPRISES, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                    |                                                                                                                           |                                                           |                                                                                            |  |
| Principal Place of Business<br><b>13312 150TH COURT NORTH<br/>JUPITER, FL 33478-3587</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                    |                                                                                                                           |                                                           | Mailing Address<br><b>13312 150TH COURT NORTH<br/>JUPITER, FL 33478-3587</b>                                                                                                |  |
| 2. Principal Place of Business<br><br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                    | 3. Mailing Address<br><br>Suite, Apt. #, etc.                                                                             |                                                           |                                                                                                                                                                             |  |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                    | City & State                                                                                                              |                                                           |                                                                                                                                                                             |  |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Country                                                                                                            | Zip                                                                                                                       | Country                                                   |                                                                                                                                                                             |  |
| 6. Name and Address of Current Registered Agent<br><br><b>SPILLANE, J. P<br/>12788 W. FOREST HILL BLVD<br/>SUITE 2005<br/>WELLINGTON, FL 33414</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                    |                                                                                                                           |                                                           | 7. Name and Address of New Registered Agent<br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <span style="float: right;"><b>FL</b></span> Zip Code |  |
| 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.<br>SIGNATURE: <i>Thomas D Finnel</i> DATE: <b>1-23-06</b><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>                                                                                                                                                                                        |                                                                                                                    |                                                                                                                           |                                                           |                                                                                                                                                                             |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2006 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                    | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be<br>Added to Fees |                                                           |                                                                                                                                                                             |  |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                    |                                                                                                                           | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11     |                                                                                                                                                                             |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D<br><b>FINNEL, THOMAS D<br/>13312 150TH COURT NORTH<br/>JUPITER, FL 334783587</b> <input type="checkbox"/> Delete |                                                                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                    |                                                                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                    |                                                                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                    |                                                                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                    |                                                                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                    |                                                                                                                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                           |  |
| 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. |                                                                                                                    |                                                                                                                           |                                                           |                                                                                                                                                                             |  |
| SIGNATURE: <i>Thomas D Finnel</i><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                    |                                                                                                                           | 1-23-06 5617461943<br><small>Date Daytime Phone #</small> |                                                                                                                                                                             |  |