

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000069548

FILED
Apr 20, 2006
Secretary of State

Entity Name: PATRICIA M. PRATHER INC.

Current Principal Place of Business:

609 LHOMMEDIEN STREET
LEHIGH ACRES, FL 33936

New Principal Place of Business:

609 LHOMMEDIEU STREET
LEHIGH ACRES, FL 33936

Current Mailing Address:

609 LHOMMEDIEN STREET
LEHIGH ACRES, FL 33936

New Mailing Address:

609 LHOMMEDIEU STREET
LEHIGH ACRES, FL 33936

FEI Number: 20-2840405

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRATHER, PATRICIA
609 LHOMMEDIEN STREET
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

PRATHER, PATRICIA M MS.
609 LHOMMEDIEU STREET
LEHIGH ACRES, FL 33936 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: PATRICIA M. PRATHER

04/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: PRATHER, PATRICIA M
Address: 609 LHOMMEDIEU STREET
City-St-Zip: LEHIGH ACRES, FL 33936

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: PATRICIA M. PRATHER

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04/20/2006

Electronic Signature of Signing Officer or Director

Date