

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)


FILED
Mar 07, 2006 8:00 am
Secretary of State

02-06-2006 90095 033 ***150.00

66003926



1st MOORE CR2E034 (10/05)

DOCUMENT # P05000074062					
1. Entity Name FIRST COMMONWEALTH EQUITY FUNDING, INC.					
Principal Place of Business 1980 N ATLANTIC AVE SUITE 818 COCOA BEACH FL 32931			Mailing Address 1980 N ATLANTIC AVE SUITE 818 COCOA BEACH FL 32931		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 050623473	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BURKE, WILLIAM E 1980 N ATLANTIC AVE SUITE 818 COCOA BEACH FL 32931			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL 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.					
SIGNATURE _____ (NOTE: Registered Agent signature required when constituting)					
DATE _____					
FILE NOW!!! FEE IS \$150.00. After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	<input type="checkbox"/> Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE	NAME				
NAME	STREET ADDRESS				
STREET ADDRESS	CITY - ST - ZIP				
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 Section 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, 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 fees empowered.					
SIGNATURE: <i>William E. Burke</i> William E. Burke 1/24/06 321-868-2000					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date					
Daytime Phone #					



ATTACHMENT

66003926

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 8, 2006

FIRST COMMONWEALTH EQUITY FUNDING, INC.
1980 N ATLANTIC AVE SUITE 818
COCOA BEACH, FL 32931

Subject: FIRST COMMONWEALTH EQUITY FUNDING, INC.

Reference Number: **P05000074062**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/JE
ANNUAL REPORTS SECTION

See correct
FEI in
box 4

Thank you
William
Pros
3/2/06