## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

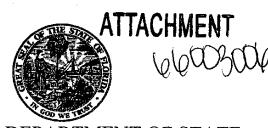
SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAMP OF BIGINGS OFFICER OR DIRECTOR

## Feb 28, 2006 8:00 am Secretary of State DOCUMENT # P05000076731 02-13-2006 90046 007 \*\*\*150.00 KENNETH RANDAL ROBERTS PA Principal Place of Business Mailing Address 66003000 5169 WOODGATE WAY 5169 WOODGATE WAY MARIANNA, FL 32446 MARIANNA, FL 32446 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 02082006 Chg-P CR2E034 (11/05) City & State City & State Applied For Not Applicable Zio Country Zio Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROBERTS, KENNETH R Street Address (P.O. Box Number is Not Acceptable) 5169 WOODGATE WAY MARIANNA, FL 32446 City 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 (NOTE: Registered Agent signature required when re-natating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete TITLE ☐ Change ☐ Addition KENNETH, ROBERTS R MALE MAKE 5169 WOODGATE WAY STREET ADDRESS STREET ADDRESS MARIANNA, FL 32446 CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition MAKE MARKE STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Oelete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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; that approximated.—

80-482-4635

wi



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 16, 2006

KENNETH RANDAL ROBERTS PA 5169 WOODGATE WAY MARIANNA, FL 32446 US

Subject: KENNETH RANDAL ROBERTS PA

Reference Number:

P05000076731

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> 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