## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 26, 2006 8:00 am Secretary of State

DOCUMENT # P05000088347  1. Entity Name FICKETT INC						04-26-2006 90227 005 ***150.00				
Principal Place of Business Mail		Mailing Address	failing Address		$\neg$					
1220 TANGERINE COURT EUSTIS, FL 32726		1220 TANGERINE COURT Eustis, FL 32726						50	0166	22
·						! <b>           </b>	ERIRI BIINI EVIN ERIN ERIN		Le 11130 et 1133 te 1	
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03112006	Chg-P	CR2E03	4 (11/05)		
City & State		City & State				4. FÉI Numbe	3021695			oplied For
Zip	Country	Zip	ip Cour		-		of Status Dasired		8.75 Add ee Require	
	6. Name and Address of Current	Registered Agent		<b></b>		7. Name and	Address of New Ro	egistered A	gent	
FICKETT, ROBERT L				Name						
1220 TANGERINE COURT EUSTIS, FL 32726				Street Address (P.O. Box Number is Not Acceptable)						
•										
				City			ii ii iii ii	FL	Zip Cod	е
the obligat	ions of registered agent.  Signature, typed or printed name of registered agent			d Agent signature			****	DATE		
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financi Trust Fund Contribution.						00 May Be d to Fees				
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS/	CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 11
TITLE NAME			TITLE						☐ Change	☐ Addition
STREET ADDRESS	·			ET ADDRESS						
CITY-ST-ZIP	EUSTIS, FL 32726		CITY	-ST-ZIP						
TITLE	D/O .	Delete	TITLE						Change	☐ Addition
NAME STREET ADDRESS	FICKETT, RYAN A 1220 TANGERINE COURT	•	NAM STRE	E Et address						
CITY-ST-ZIP	EUSTIS, FL 32726			-ST-ZIP						
TITLE	D/O	Delete	TITLE						Change	Addition
NAME	SMITH, JUSTIN	- /-× -	, NAW	1	-	•				
STREET ADDRESS CITY-ST-ZIP	1220 TANGERINE COURT EUSTIS, FL 32726	•		ET ADDRESS - ST-ZIP						
IIILE		☐ Delete	TITLE	:					Change	☐ Addition
NAME			NAM	I .						_
STREET ADORESS CITY-ST-ZIP				ET ADORESS - ST-ZIP						
TITLE		☐ Delete	TITLE	-				<del></del>	☐ Change	Addition
NAME CTREET ADDRESS			NAM							
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS -ST-ZIP						
TITLE		☐ Delete	TITLE						Change	Addition
NAME			NAMI							
STREET ADDRESS CITY-ST-ZIP				et address -st-zip						
	ertify that the information supplied with	this filing does not qualify fo	_		ntained i	in Chanter 110	Florida Statutes 1	further certif	v that the i	oformation

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 like empowered.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/06

352 267 7375

Daytime Phone #