

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000135001

FILED  
Apr 20, 2006  
Secretary of State

Entity Name: CLASSIC CONNECTION SIMERLY'S & MANNINO INC.

**Current Principal Place of Business:**

100 WAYMONT CT SUITE 110  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

100 WAYMONT CT SUITE 110  
LAKE MARY, FL 32746

**New Mailing Address:**

FEI Number: 20-3640948      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SIMERLY, KAYE  
100 WAYMONT CT SUITE 110  
LAKE MARY, FL 32746 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MANNINO, PHIL  
Address: 100 WAYMONT CT SUITE 110  
City-St-Zip: LAKE MARY, FL 32746

Title: V ( ) Delete  
Name: SIMERLY, KAYE  
Address: 100 WAYMONT CT SUITE 110  
City-St-Zip: LAKE MARY, FL 32746

Title: ST ( ) Delete  
Name: SIMERLY, PARKS  
Address: 100 WAYMONT CT SUITE 110  
City-St-Zip: LAKE MARY, FL 32746

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: PHIL MANNINO

P

04/20/2006

Electronic Signature of Signing Officer or Director

Date