

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90205 015 ***150.00

DOCUMENT # P05000135974					
1. Entity Name G. A. BREITENBECK CONSULTING, INC.					
Principal Place of Business 3175 SOUTH CONGRESS AVENUE SUITE 301 PALM SPRINGS, FL 33461			Mailing Address 3175 SOUTH CONGRESS AVENUE SUITE 301 PALM SPRINGS, FL 33461		
2. Principal Place of Business 8041 St. John Ave. West Suite, Apt. #, etc.		3. Mailing Address 8041 St. John Ave. West Suite, Apt. #, etc.			
City & State Boynton Beach, FL		City & State Boynton Beach, FL		4. FEI Number 20-6463710	
Zip 33437 Country USA		Zip 33437 Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CRENSHAW, KENNETH B 3175 SOUTH CONGRESS AVENUE SUITE 301 PALM SPRINGS, FL 33461			7. Name and Address of New Registered Agent Name: <u>Kenneth B. Crenshaw</u> Street Address (P.O. Box Number is Not Acceptable): <u>1555 Palm Beach Lakes Blvd., Suite 920</u> City: <u>West Palm Beach</u> FL Zip Code <u>33401</u>		
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: <u>Kenneth B. Crenshaw</u> 4/6/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BREITENBECK, GREGORY A <input type="checkbox"/> Delete 8041 SAINT JOHN AVENUE WEST BOYNTON BEACH, FL 33437		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS 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 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 <u>Gregory A. Breitenbeck</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			April 15, 2006 (561) 926-6654 <small>Date Daytime Phone #</small>		