## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000152129

FILED Feb 10, 2006 Secretary of State

Entity Name: SAVA ONE, INC. **Current Principal Place of Business: New Principal Place of Business:** 25400 SW 139 AVE. PRINCETON, FL **Current Mailing Address: New Mailing Address:** 25400 SW 139 AVE. PRINCETON, FL FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JONES, SHARON S 20930 SW 248 STREET HOMESTEAD, FL 33031 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition PRICE, C.W. PRICE, C.W. Name: Name: 25400 SW 139 AVE. 25400 SW 139 AVE. Address: Address: City-St-Zip: PRINCETON, FL City-St-Zip: PRINCETON, FL 33032 Title: Title: SV (X) Change ( ) Addition () Delete CRAWFORD, GALE S CRAWFORD, GALE S Name: Name: Address: 25400 SW 139 AVE. 25400 SW 139 AVE. Address: PRINCETON, FL 33032 PRINCETON, FL City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: C.W.PRICE P 02/10/2006