

2006 FOR PROFIT CORPORATION ANNUAL REPORT

8/25/2006-90001-019-\$150.00-\$150.00

DOCUMENT # P05000165375		
1. Entity Name PAMELA FOSTER INC		

FILED
Sep 28, 2006 8:00 A.M.
Secretary of State

Principal Place of Business 2302 E FORT KING STREET OCALA, FL 34471	Mailing Address 2302 E FORT KING STREET OCALA, FL 34471
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2. Principal Place of Business 3930 NE 14 th Ct.	3. Mailing Address 3930 NE 14 th Ct.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

08112006 Chg-P CR2E034 (11/05)

City & State Ocala FL	City & State Ocala FL
Zip 34479	Zip 34479
Country USA	Country USA

4. FEI Number 90-3302652	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent FOSTER, PAMELA B 2302 E FORT KING STREET OCALA, FL 34471	
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7. Name and Address of New Registered Agent Name Foster, Pamela B. Street Address (P.O. Box Number is Not Acceptable) 3930 NE 14 th Court City Ocala FL Zip Code 34479	
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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: Pamela B. Foster DATE: 8-11-06	
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FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P D FOSTER, PAMELA B 2302 E FORT KING STREET OCALA, FL 34471 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FOSTER, RICHARD E 2302 E FORT KING STREET OCALA, FL 34471 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P D Foster, Pamela B. 3930 NE 14 th Ct. Ocala, FL 34479 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Foster, Richard E. 3930 NE 14 th Ct. Ocala, FL 34479 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: Pamela B. Foster	DATE: 8-11-2006