# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 24, 2006**
**Secretary of State**

DOCUMENT# P05782

**Entity Name:** AMARR COMPANY

**Current Principal Place of Business:**

165 CARRIAGE CT
WINSTON-SALEM, NC 27105

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 288
WINSTON-SALEM, NC 271020288 US

**New Mailing Address:**

**FEI Number: 56-0562919** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: C ( ) Delete
Name: HUKILL, MATTHEWS
Address: 20 HIGHGATE CT
City-St-Zip: GREENSBORO, NC 27407

Title: P ( ) Delete
Name: BRENNER, RICHARD
Address: 464 SHEFFIELD DR
City-St-Zip: WINSTON-SALEM, NC

Title: VPOD ( ) Delete
Name: SEARS, RICHARD
Address: 2451 BIRDLE LANE
City-St-Zip: CONOVER, NC 28613

Title: CFO ( ) Delete
Name: MICK, JEFFREY D
Address: 920 CROFTON CREEK
City-St-Zip: LEWISVILLE, NC 27023

**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:

Title: ( ) Change ( ) Addition
Name:
Address:
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: MATTHEW S HUKILL C 04/24/2006

Electronic Signature of Signing Officer or Director — Date