

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90213 039 ***150.00

DOCUMENT # P19644

1. Entity Name

FORT IONA, INC.



Principal Place of Business

2560 SECOND AVENUE
DETROIT MI 48201

Mailing Address

2560 SECOND AVENUE
DETROIT MI 48201

2. Principal Place of Business

14030 E. 14 Mile Rd.

Suite, Apt. #, etc.

3. Mailing Address

14030 E. 14 Mile Rd.

Suite, Apt. #, etc.

City & State
Warren, MI

City & State
Warren, MI

Zip
48088

Country
USA

Zip
48088

Country
USA

4. FEI Number
38-2823697

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILSEY, GEORGE F.
275 FOURTH STREET NORTH
ST. PETERSBURG FL 33701-3209

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

(Signature typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00 May Be**
Trust Fund Contribution. ☐ Added to Fees

10. OFFICERS AND DIRECTORS

TITLE .. PD ☐ Delete
NAME RUBY, CARL
STREET ADDRESS 2560 SECOND AVENUE
CITY-ST-ZIP DETROIT MI

TITLE S ☐ Delete
NAME SIEGER, MARY
STREET ADDRESS 2560 SECOND AVE
CITY-ST-ZIP DETROIT MI 48201

TITLE T ☐ Delete
NAME DISHELL, DON
STREET ADDRESS 2560 SECOND AVENUE
CITY-ST-ZIP DETROIT MI

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 14030 E. 14 Mile Rd.
CITY-ST-ZIP Warren, MI 48088

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Carl Ruby

Date

Daytime Phone #

4/15/06