

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P36623

FILED  
Jan 13, 2006  
Secretary of State

Entity Name: BARCALOUNGER CORPORATION

**Current Principal Place of Business:**

1450 ATLANTIC AVENUE  
ROCKY MOUNT, NC 27802

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 6157  
ROCKY MOUNT, NC 27802

**New Mailing Address:**

FEI Number: 56-1065221      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: D ( ) Delete  
Name: MUQADDAM, M SALEEM  
Address: 1201 N.ORANGE ST. STE.790  
City-St-Zip: WILMINGTON, DE 19801

Title: P ( ) Delete  
Name: STEVENS, WAYNE  
Address: 1450 ATLANTIC AVENUE  
City-St-Zip: ROCKY MOUNT, NC 27802

Title: VS ( ) Delete  
Name: CHAMBERLAIN, PHILLIP L  
Address: 1450 ATLANTIC AVENUE  
City-St-Zip: ROCKY MOUNT, NC 27802

Title: D ( ) Delete  
Name: WAGSTAFF, DAVID  
Address: 1515 POYDRAS STREET, SUITE 1500  
City-St-Zip: NEW ORLEANS, LA 70112

**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: PHILLIP L. CHAMBERLAIN

VS

01/13/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date