## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State** DOCUMENT # P92000004050 02-13-2006 90029 038 \*\*\*150.00 1. Entity Name JEFF AND MARTY, INC. Principal Place of Business Mailing Address 40013137 936 INT'L SPEEDWAY BLVD. 936 INT'L SPEEDWAY BLVD. DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/05) 02042006 Chg-P Applied For City & State City & State 4. FEI Number 59-3153173 Not Applicable Country Žip Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PORTEOUS, GEORGE J Street Address (P.O. Box Number is Not Acceptable) 936 INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH, FL City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE ŧпlе Addition PORTEOUS, GEORGE J NAME NAME STREET ADDRESS 936 INT'L SPEEDWAY BLVD. STREET ADDRESS 769 Horseman Drive CITY-ST-ZIP DAYTONA BEACH, FL 32114 CITY-ST-ZIP Port Orange, FL D Delete TITLE Addition PORTEOUS, MARTHA E NAME NAME STREET ADDRESS 936 INT'L SPEEDWAY BLVD. STREET ADDRESS 769 Horseman Drive City-St-7IP DAYTONA BEACH, FL 32114 CITY-ST-ZIP Port Orange, FL 32127 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE - 🔲 Change The Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP

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

FILED Feb 13, 2006 8:00 am