## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 27, 2006 08:00 AM Secretary of State

DOCUMENT # P93000041368  1. Enity Name BRENTWOOD ACCOUNTING SERVICES, INC.				
Principal Place of Business Mailing Address 3223 LALANI BLVD 3223 LALANI BLVD SARASOTA, FL 34232 SARASOTA, FL 34232			)	
E	O NOT WRITE  8. Name and Address of Current Re		CE	03252006 No Chg-P CR2E034 (11/05)  4. FEI Number Applied For S5-0416247 Not Applicable  5. Certificate of Status Desired   \$8.75 Additional Fee Required
EHRET, LINDA C 3223 LALANI BLVD SARASOTA, FL 34232				DO NOT WRITE IN THIS SPACE
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 the it applicable  (MOTE Registered Agent signature required when retiretating)  CATE				
FILE NOWIN FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  Trust Fund Contribution.				JOO May Be Jed to Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF  D EHRET, LINDA C 3223 LALANI BLVD SARASOTA, FL 34232  D EHRET, MICHAEL E 3223 LALANI BLVD SARASOTA, FL 34232	RECTORS	·	800000480380 04/11/86 80008-011 150.00
TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS				DO NOT WRITE IN THIS SPACE
CITY-ST-ZIP  HIFLE  NAME  STREET ADDRESS  CITY-ST-ZIP				
TIFLE NAME STREET ADDRESS CITY-SI-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 ff changed, or on an attachment with an address, with all other like empowered.				

SIGNATURE: SIGNATURE AND TYPES OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR DESCRIPTION Date DESCRIPTION DESCRIP