## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Aug 24, 2006 08:00 Al Secretary of State DOCUMENT # P93000049940 1. Entity Name N.L. LANGLEY, INC. Mailing Address Principal Place of Business 4311 YORKETOWNE RD. 4311 YORKETOWNE RD. ORLANDO, FL 32812 ORLANDO, FL 32812 No Chg-P CR2E034 (11/05) 08222006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3190776 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent CARLIN, PHILIP A DO NOT WRITE 125 S SWOOPE AVE, #104 MAITLAND, FL 32751 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. 08/24/06-80005-002 150.00 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent algorature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS 10. PD DILE LANGLEY, NANCY L NAME STREET ADDRESS 4311 YORKETOWNE RD. ORLANDO, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS CHY-SI-ZIP BILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP mle NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same logal effect as if made under eath; 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 in

**FILED**