2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 06, 2006 08:00 AM Secretary of State DOCUMENT # P93000063098 1. Entity Name DON ROGERS & ASSOCIATES, INC. Principal Place of Business Mailing Address 205 JAMES ST 205 JAMES ST BRANDON, FL 33510 BRANDON, FL 33510 01312006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3202077 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WHEELER, RICHARD F ESQ DO NOT WRITE BERG & WHEELER, P.A. 217 E. ROBERTSON STREET IN THIS SPACE BRANDON, FL 33511 3. 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 reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE ROGERS, DONALD NAME STREET ADDRESS 205 JAMES ST CITY-ST-ZIP BRANDON, FL 33510 TITLE NAME U00000494379 04/20/06-80042-021 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 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 effact as it 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

07-03-06 (813)661-1803

FILED