

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 27, 2006 08:00 AM  
Secretary of State

DOCUMENT # P94000023045

1. Entity Name

COPY PRODUCTS COMPANY OF PANAMA CITY



Principal Place of Business

1029 JENKS AVE.  
PANAMA CITY, FL 32401 US

Mailing Address

910 E. CERVANTES ST.  
PENSACOLA, FL 32501



02172006

No Chg-P

CR2E034 (11/05)

4. FEI Number

59-3248248

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WALLACE, R R  
910 E. CERVANTES ST.  
PENSACOLA, FL 32501

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.



**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME WALLACE, R R  
STREET ADDRESS 910 E. CERVANTES ST.  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE  
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000000448913  
03/09/06-80032-012 150.00

DO NOT WRITE  
IN THIS SPACE

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-24-06

850-432-1580