

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000026263

FILED  
Jul 03, 2006  
Secretary of State

Entity Name: FOSSETT ENTERPRISES, INC.

## Current Principal Place of Business:

2240 PALM BEACH LAKES BLVD.  
SUITE 310  
WEST PALM BEACH, FL 33409

## New Principal Place of Business:

2240 PALM BEACH LAKES BLVD.  
SUITE 250  
WEST PALM BEACH, FL 33409

## Current Mailing Address:

2240 PALM BEACH LAKES BLVD.  
SUITE 310  
WEST PALM BEACH, FL 33409

## New Mailing Address:

2240 PALM BEACH LAKES BLVD.  
SUITE 250  
WEST PALM BEACH, FL 33409

FEI Number: 65-0482805

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOSSETT, WALLACE L  
13385 WHISPERING LAKES LN.  
PALM BEACH GARDENS, FL 33418 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: FOSSETT, BARBARA G  
Address: 13385 WHISPERING LAKES LN.  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VT ( ) Delete  
Name: FOSSETT, WALLACE L  
Address: 13385 WHISPERING LAKES LN  
City-St-Zip: PALM BEACH GARDENS, FL 33418

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WALLACE L. FOSSETT

VT

07/03/2006

Electronic Signature of Signing Officer or Director

Date