## 2006 FOR PROFIT CORPORATION

## **FILED ANNUAL REPORT** Mar 03, 2006 08:00 AM **DOCUMENT # P94000085799 Secretary of State** ROBERT KOOP JOHNSON, P.A. Principal Place of Business \_Mailing Address 1170-3RD ST. S. 1170-3RD ST. S **SUITE B-205** SUITE B-205 NAPLES, FL 34102-7062 US NAPLES, FL 34102 US No Chg-P 01302006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0537732 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent JOHNSON, ROBERT K DO NOT WRITE 1170-3RD ST. S **SUITE B-205** IN THIS SPACE NAPLES, FL 34102 5. 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. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printer name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS Ω TITLE JOHNSON, ROBERT K. MAME STREET ADDRESS 1170-3RD ST., S. SUITE B-205 U0000045**50**77 CITY-ST-ZIP NAPLES, FL 34102 03/15/06-80042-001 150.00 NAME STREET ADDRESS

## DO NOT WRITE IN THIS SPACE

12. Thereby certify that the information supplied with this filling 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.

CKTY-ST-ZIP T171.E NAME STREET ADDRESS

CITY-ST-ZIP TITLE

NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

2/28/06