2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000087080 PATRICIA D. LOTT & ASSOCIATES, P.A.



FILED Apr 06, 2006 08:00 AM Secretary of State

Principal Place of Business
25 W CEDAR ST, 500
PENSACOLA, FL 32502

Mailing Address

25 W CEDAR ST, 500 PENSACOLA, FL 32502

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No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3328526

Applied For Not Applicat

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RAY, KIEVIT & KELLY, P.A.

DO NOT WRITE

PENSACC	751 DLA, FL 32502		IN	THIS SPACE	
	named entity submits this statement for the poons of registered agent.	l ourpose of changing its registered of	fice or registered agent, or b	oth, in the State of Florida I am familiar with,	and acc
SIGNATURE.	Signature, typed or printed name of registered agent and title	il applicable (NOTE: Registered Ager	nt signature required when reinstating)	DATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution,	\$5.00 May Be Added to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIRECT D LOTT, PATRICIA D 25 W CEDAR ST, 500 PENSACOLA, FL 32502	CTORS }		1000000495018 04/20/06-80069-009 50.00)
STREET ADDRESS CHY-SI-ZIP TITLE NAME					
STREET ADDRESS CITY-ST-ZIP	-		DO	NOT WRITE	
Title Name Street Mooress City-St-Zip			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	·				
TITLE					

12. I hereby 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 direction 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. changed, or on an attackment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS

4-4-06

850-469-1080