

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 05, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000006836



1. Entity Name
ORGANIZATIONAL SUPPORT INCORPORATED

Principal Place of Business
**24260 NW 27TH ST
MORRISTON, FL 32668**

Mailing Address
**24260 NW 27TH ST
MORRISTON, FL 32668**



03092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3293130	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134**

**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 _____ (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	PD
NAME	SCOTT, ROBERT L JR.
STREET ADDRESS	24260 NW 27TH ST
CITY-ST-ZIP	MORRISTON, FL 32668
TITLE	STVP
NAME	SCOTT, DELORES R
STREET ADDRESS	24260 NW 27TH ST
CITY-ST-ZIP	MORRISTON, FL 32668
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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**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: *Delores R. Scott Ex. V.P. Robert L. Scott* 4-4-06 352-465-331