## 2006 FOR PROFIT CORPORATION

## FILED Mar 29, 2006 8:00 am Secretary of State

Country		ANNUAL	KEFOKI			<b>N</b>	CCICIA	iiy u	71 DU	acc
4315 S.W. LUDILUM ST. PALM CITY, FL 34990 US  2. Principal Place of Business  Suite, Apt. #. etc.   Suite, Apt. #. etc.   Suite, Apt. #. etc.   03122006   ChgP   CR26034 (11/05)  City & State   Curality   Zip   Country   Application   Sc. Operation of Status Desired   Sc. Operation	1. Entity Name							-		
Suite, Apt. #, etc.   A . FEI Number   65-055296   S. Cerification of Suitus Desired   \$8.75 Auditional   Sec.   A . FEI Number   65-055296   \$8.75 Auditional   Sec.   Additional   Sec.	4315 S.W. LUDLUM ST. 4315 S.W. LUDLUM ST.			US			> - Fial fun atm cth ti	MA <b>es</b> iri arti g	FU SEM ERIEN SI	1 <b>75</b> 1 51 1 <b>75</b> 1
City & State	2. Principal P	lace of Business	3. Mailing Address							
Country   Coun	Suite, Apt. #, etc.				03122006	Chg-P	CR2E0	34 (11/05)		
S. Cerrificate Status Desired   Foo Required Agent										<del></del>
AULTZ, DAVIS L   4315 S.W. LUDILUM ST.   PALM CITY, FL 34990	Zip			Countr	у 	<u> </u>		<u> </u>	Fee Require	
A315 S.W. LUDLUM ST. PALM CITY, FL 34990  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    Total Palmon	6. Name and Address of Current Registered Agent				Name	7. Name and	Address of New I	Registered /	Agent	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.    Signature   Signat	4315 S.W. LUDLUM ST.			-	Street Address (	P.O. Box Numbe	is Not Acceptab	le)		
SIGNATURE   Systems, hybrid or pritied remore of registered agent and title of appeticable. (MOTE: Registered Agent sepreture recovered when microtatory) DATE   TILE NOWITIE FEEE IS \$150.00   P. Election Comparign Financing Trust Fund Contribution.   S5.00 Mey Be Added to Fees   TILE NOWITIE FEEE IS \$150.00   P. Election Comparign Financing Trust Fund Contribution.   S5.00 Mey Be Added to Fees   State Fund Contribution.	•				City			FL	Zip Code	3
### After May 1, 2006 Fee will be \$50.00    10.	the obligat	ions of registered agent.			-		, in the State of F		familiar with,	and accept
TITLE NAME STREET ADDRESS CITY-ST-2P STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS CITY-ST-2P	FIL After Ma	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campaig	ın Financ	cing \$5.	.00 May Be			.,	
NAME STREET ADDRESS CITY-ST-2P  AULTZ, DAVID L STREET ADDRESS CITY-ST-2P  STREET ADDRESS CITY-ST-2P  TITLE NAME STREET ADDRESS CITY-ST-2P	10.		DIRECTORS	11.		ADDITIONS/	HANGES TO OF	FICERS AND	DIRECTORS	SIN 11
NAME SITRET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS	AULTZ, DAVID L 4315 S.W. LUDLUM ST.	C.) Delete	NAME STREET					Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADORESS		☐ Delete	NAME STREET					Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS	-	☐ Delete	NAME STREET	E E				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	name Street address		□ Detete	NAME STREET					☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS		☐ Delete	NAME STREET					Change	Addition
	NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET CITY-S	ST-ZIP					

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 eath; 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 OFFICER OR DIRECTOR

Date

Date

561-719-8906