## **2006 FOR PROFIT CORPORATION ANNUAL REPORT** DOCUMENT # P95000050466 1. Entity Name BARÓN CAPITAL XI, INC. Principal Place of Business Mailing Address 60033441 109 WEST COMMERCIAL STREET 109 WEST COMMERCIAL STREET SANFORD, FL 32771 US SANFORD, FL 32771 US DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent BARCAP REALTY SERVICES GROUP, INC 109 WEST COMMERCIAL STREET SANFORD, FL 32771 IN THIS SPACE

## **FILED** May 02, 2006 8:00 am Secretary of State

05-02-2006 90223 034 \*\*\*150.00



| 04042000 110 Ong .               |  |                                   |  |
|----------------------------------|--|-----------------------------------|--|
| 4. FEI Number                    |  | Applied For                       |  |
| 65-0590763                       |  | Not Applicable                    |  |
| 5. Certificate of Status Desired |  | \$8.75 Additional<br>Fee Required |  |

DO NOT WRITE

| SIGNATURE_                                     | ions of registered agent.  J. STAPHEN TO Sydnature, typed or printed name of registered agent and title ri |  | Agent signature               | e required when reinstating)     | 4-24-06<br>DATE  |  |
|--|--|--|-------------------------------|----------------------------------|--|--|
|  | E NOW!!! FEE IS \$150.00<br>ay 1, 2006 Fee will be \$550.00  | Election Campaign Financ<br>Trust Fund Contribution.                 | ing                           | \$5.00 May Be<br>Added to Fees   | :  |  |
| 10.  | OFFICERS AND DIREC   | TORS   |                               |                                  |  |  |
| TITLE<br>Name<br>Street address<br>City-St-Zip | P<br>RYDELL, JEROME S<br>109 WEST COMMERCIAL STREET<br>SANFORD, FL 32771                                   | ·  |                               |                                  | ÷  |  |
| ITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | V MILLER, J. STEPHEN 109 WEST COMMERCIAL STREET SANFORD, FL 32771  |  |                               |                                  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |  | DO NOT WRITE<br>IN THIS SPACE |                                  |  |  |
| TITLE<br>Name<br>Street address<br>City-St-Zip |  |  |                               |                                  |  |  |
| ITLE<br>IAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |  |  |                               |                                  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |  |                               |                                  |  |  |
| indicated<br>of the cor                        | on this report or supplemental report is true a  | nd accurate and that my signatu<br>to execute this report as require | re shall hav                  | ve the same legal effect as if a | da Statutes. I further certify that the information<br>made under oath; that I am an officer or director<br>that my name appears in Block 10 or Block 11 i |  |

J. STEPHEN MILLER