2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000058236

Entity Name: TEAM INVESTMENTS, INC.

FILED Mar 14, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1680 OAKS BLVD. 1680 OAKES BLVD.

NAPLES, FL 34119 US NAPLES, FL 34119 US

Current Mailing Address: New Mailing Address:

P O BOX 110208

NAPLES, FL 341080104 US

FEI Number: 65-0595422 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, JERRY R SMITH, JERRY R 1680 OAKS BLVD. 1680 OAKES BLVD.

NAPLES, FL 34119 US NAPLES, FL 34119 US

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.

SIGNATURE: 03/14/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition

 Name:
 SMITH, JERRY R
 Name:
 SMITH, JERRY R

 Address:
 1680 OAKS BLVD.
 Address:
 1680 OAKES BLVD.

 City-St-Zip:
 NAPLES, FL 34119
 City-St-Zip:
 NAPLES, FL 34119

Title: DS () Delete Title: DS (X) Change () Addition

 Name:
 SMITH, NANCY
 Name:
 SMITH, NANCY A

 Address:
 1680 OAKS BLVD
 Address:
 1680 OAKES BLVD

 City-St-Zip:
 NAPLES, FL 34119
 City-St-Zip:
 NAPLES, FL 34119

Title: DT () Delete Title: DT (X) Change () Addition

 Name:
 SMITH, BRADLEY
 Name:
 SMITH, BRADLEY R

 Address:
 70 JUNE BLVD E.
 Address:
 70 JUNG BLVD E.

 City-St-Zip:
 NAPLES, FL 34120
 City-St-Zip:
 NAPLES, FL 34120

Title: DV () Delete Title: DV (X) Change () Addition

 Name:
 SMITH, LAURIÉ
 Name:
 SMITH, LAURIÉ A

 Address:
 70 JUNE BLVD E.
 Address:
 70 JUNG BLVD E.

 City-St-Zip:
 NAPLES, FL 34120
 City-St-Zip:
 NAPLES, FL 34120

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY A. SMITH DS 03/14/2006