

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000073301

**FILED
Feb 26, 2006
Secretary of State**

Entity Name: NEFER ART, INC.

Current Principal Place of Business:

P.O. BOX 7442
NORTH PORT, FL 34287

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7442
NORTH PORT, FL 34287

New Mailing Address:

FEI Number: 04-3653865 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SNOW, JOHN R
195 WEKIVA SPRINGS RD.
SUITE 214
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FRITZ, WALTER
Address: P.O. BOX 7442
City-St-Zip: NORTH PORT, FL 34287 OC

Title: VP () Delete
Name: WILLIAMS-FRITZ, ANITRA F
Address: P.O. BOX 7442
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: WILLIAMS-FRITZ, ANITRA F
Address: P.O. BOX 7442
City-St-Zip: NORTH PORT, FL 34287

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: WALTER FRITZ

P

02/26/2006

Electronic Signature of Signing Officer or Director

_____ Date