

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000086169

FILED  
Jul 03, 2006  
Secretary of State

**Entity Name:** BUG OUT SERVICE OF WEST FLORIDA, INC.

**Current Principal Place of Business:**

7201 NORTH 9TH AVENUE  
SUITE A-2  
PENSACOLA, FL 32504

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 11307  
PENSACOLA, FL 325241307

**New Mailing Address:**

**FEI Number:** 59-3346597

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SESSIONS, JOHN F.  
5951 ARLINGTON EXPRESSWAY  
SUITE 3000  
JACKSONVILLE, FL 32211 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SESSIONS, JOHN  
Address: 5951 ARLINGTON EXPRESSWAY  
City-St-Zip: JACKSONVILLE, FL

Title: VPD ( ) Delete  
Name: TATE, EDWARD D  
Address: 4607 LEBORHE ARDE  
City-St-Zip: PENSACOLA, FL 32514

Title: ST ( ) Delete  
Name: JANES, ROBERT S  
Address: 5951 ARLINGTON EXPRESSWAY  
City-St-Zip: JACKSONVILLE, FL 32211

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPD (X) Change ( ) Addition  
Name: TATE, EDWARD D  
Address: 4607 LABORDE LANE  
City-St-Zip: PENSACOLA, FL 32514

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

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:** EDWARD D>

VPD

07/03/2006

Electronic Signature of Signing Officer or Director

Date