

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000093433

**FILED**  
**Feb 27, 2006**  
**Secretary of State**

**Entity Name:** THE HAMILTON GROUP MANAGEMENT COMPANY, INC.

**Current Principal Place of Business:**

221 BLUE JUNIPER BLVD.  
VENICE, FL 34292 US

**New Principal Place of Business:**

**Current Mailing Address:**

4025 CATTLEMEN RD.  
#141  
SARASOTA, FL 34233 US

**New Mailing Address:**

P.O. BOX 3250  
PLACIDA, FL 33946 US

**FEI Number:** 65-0629491

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAMILTON, JANA L  
P.O. BOX 3250  
PLACIDA, FL 33946 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: DP ( ) Delete  
Name: HAMILTON, JANA  
Address: 4025 CATTLEMAN RD. #141  
City-St-Zip: SARASOTA, FL 34233

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

Title: DP (X) Change ( ) Addition  
Name: HAMILTON, JANA  
Address: P.O. BOX 3250  
City-St-Zip: PLACIDA, FL 33946

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:** JANA L. HAMILTON

**PRES**

**02/27/2006**

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date