

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000096742		
1. Entity Name STAN TAIT & ASSOCIATES, INC.		

Principal Place of Business 2952 WELLINGTON CIR TALLAHASSEE FL 32309 US	Mailing Address 2952 WELLINGTON CIR TALLAHASSEE FL 32309 US
---	---



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/05)

4. FEI Number **59-3365398** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**TAIT, DAVID L
2952 WELLINGTON CIR
TALLAHASSEE FL 32308**

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____ State **FL** Zip Code _____

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

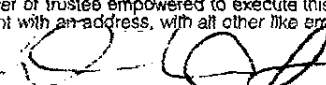
10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	TAIT, DAVID L	
STREET ADDRESS	2952 WELLINGTON CIR	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	VPD	☐ Delete
NAME	TAIT, MARILYN P	
STREET ADDRESS	2952 WELLINGTON CIR	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	D	☐ Delete
NAME	TAIT, STAN	
STREET ADDRESS	2952 WELLINGTON CIR	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	TD	☐ Delete
NAME	TAIT, LINDA	
STREET ADDRESS	2952 WELLINGTON CIR	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	D	☐ Delete
NAME	BESSE, THERESA	
STREET ADDRESS	2952 WELLINGTON CIR	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	D	☐ Delete
NAME	TAIT, LISA	
STREET ADDRESS	2952 WELLINGTON CIRCLE	
CITY-ST-ZIP	TALLAHASSEE FL 32309	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Add
NAME	U000000449768	
STREET ADDRESS	03/09/06-80069-005 150.00	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 of Block if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  2/22/06 906-9220

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #