2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P96000008023

Entity Name
MONTGOMERY MANAGEMENT CO.

Principal Place of Business	Mailing Address
330 S PINEAPPLE AVE 115 SARSOTA, FL 34236	330 S PINEAPPLE AVE 115 SARSOTA, FL 34236

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01202006   No Chg-P   CR2E034 (11/05)

4. FEI Number
65-0645673

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MARCUS, ANDREW
330 S PINEAPPLE AVE
115
SARSOTA, FL 34236

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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

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

H00000397969

01/30/06-80066-021   150.00

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

OFFICERS AND DIRECTORS

TITLE	P	
NAME	MARCUS, ANDREW	
STREET ADDRESS	330 S PINEAPPLE AVE	
CITY-ST-ZIP	SARSOTA, FL 34236	

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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   ANDREW MARCUS   1/20/06   941-957 3329

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #