

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000021726

1. Entity Name
NUBOARD MEDIA, INC.



Principal Place of Business
2270 HARBOR RD
NAPLES, FL 34104 US

Mailing Address
2270 HARBOR RD
NAPLES, FL 34104 US



04182006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0651285

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

LILLY, KEVIN J
2270 HARBOR RD
NAPLES, FL 34104

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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

1100000549876
05/13/06-80038-024 150.00

10. OFFICERS AND DIRECTORS

TITLE P
NAME ALLEGRO, JAMES JR
STREET ADDRESS 2270 HARBOR RD
CITY-ST-ZIP NAPLES, FL 34104

TITLE VP
NAME ALLEGRO, FRANK N
STREET ADDRESS 2270 HARBOR RD
CITY-ST-ZIP NAPLES, FL 34104

TITLE VP
NAME LILLY, KEVIN J
STREET ADDRESS 2270 HARBOR RD
CITY-ST-ZIP NAPLES, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-06

239-821-6471

Date

Daytime Phone #