

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 13, 2006 8:00 am**  
**Secretary of State**

01-13-2006 90043 031 \*\*\*150.00

<b>DOCUMENT # P96000025508</b>						
<b>1. Entity Name:</b> ARGENT MANAGEMENT COMPANY						
<b>Principal Place of Business</b> 7916 LINKS WAY PORT SAINT LUCIE, FL 34986 US			<b>Mailing Address</b> P.O. BOX 880009 PORT SAINT LUCIE, FL 34988 US			
<b>2. Principal Place of Business</b> 19424 Makayla Lane Suite, Apt. #, etc.		<b>3. Mailing Address</b> P.O. Box 668 Suite, Apt. #, etc.				
<b>City &amp; State</b> Cornelius, N.C.		<b>City &amp; State</b> Cornelius, N.C.		<b>4. FEI Number</b> 65-0659418		
<b>Zip</b> 28031		<b>Country</b> U.S.A.		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		
<b>6. Name and Address of Current Registered Agent</b> TRAVANI & RICHTER, P.A. 4360 NORTHLAKE BLVD. SUITE 102 PALM BEACH GARDENS, FL 33410			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;">FL</span> Zip Code			
<b>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.</b>						
<b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when re-registering)						
<b>FILE NOW!!! FEB IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>				
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	CS HOWARD, PATSY J 7916 LINKS WAY PORT SAINT LUCIE, FL 34988		<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	CS HOWARD, PATSY J 19424 Makayla Lane Cornelius, North Carolina 28031	
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<b>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 807, 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.</b>						
<b>SIGNATURE:</b>			Patsy J. Howard			
Jan. 10, 2006			704-987-3672			