

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007 8:00 am
Secretary of State

01-09-2007 90056 026 ***150.00

DOCUMENT # P96000025508

1. Entity Name
ARGENT MANAGEMENT COMPANY



Principal Place of Business
**1924 MAKAYLA LN
CORNELIUS, NC 28031 US**

Mailing Address
**PO BOX 668
CORNELIUS, NC 28031 US**

60000747



2. Principal Place of Business - No P.O. Box #

18910 Balmore Pines Lane

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01032007 Chg-P CR2E034 (12/06)

City & State
Cornelius N.C.

City & State

No change

4. FEI Number
65-0659418

Applied For
Not Applicable

Zip
28031

Country
U.S.A

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TRAVANI & RICHTER, P.A.
4360 NORTHLAKE BLVD.
SUITE 102
PALM BEACH GARDENS, FL 33410**

Name

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

City

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

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CS** ☐ Delete
NAME **HOWARD, PATSY J**
STREET ADDRESS **1924 MAKAYLA LN**
CITY-ST-ZIP **CORNELIUS, NC 28031**

TITLE **no change** ☒ Change ☐ Addition
NAME **no change**
STREET ADDRESS **18910 Balmore Pines Lane**
CITY-ST-ZIP **Cornelius N.C. 28031**

TITLE **PT** ☐ Delete
NAME **HOWARD, JOEL L**
STREET ADDRESS **1924 MAKAYLA LN**
CITY-ST-ZIP **CORNELIUS, NC 28031**

TITLE **no change** ☒ Change ☐ Addition
NAME **no change**
STREET ADDRESS **18910 Balmore Pines Lane**
CITY-ST-ZIP **Cornelius N.C. 28031**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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 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:

Patsy J Howard

Date

Daytime Phone #

704 987 3672